

STROLL FOR HOSPICE



**Sunday,
April 19, 2009**

For more information
call (219) 462-5195
www.VNAportercounty.org

To benefit the
Visiting Nurse Association
Home Hospice Program
and the Arthur B. and Ethel V. Horton
VNA Hospice Center

Visiting Nurse Association
VNA Hospice
501 Marquette Street
Valparaiso, IN 46383

Stroll for Hospice Waiver Form

In consideration of being permitted to participate in the Stroll for Hospice, I hereby for myself, my heirs and personal representatives assume any and all risks which might be associated with the event. I further waive, release, discharge and covenant not to sue the Visiting Nurse Association/VNA Hospice of Porter County, its officers, employees, sponsors, organizers, volunteers or other representatives or their successors and assigns, for any and all injuries or damages of any kind whatsoever suffered as a result of taking part in the event and any related activities.

I also agree to the use of any photo, film, or videotape of the event for any purpose.

Date: _____

Signature: _____

Parent's signature: _____
(if participant is under 18)

T-Shirts

Stroll for Hospice T-Shirts
are available for \$12.00.

T-shirts are guaranteed with pre-registration by April 6th. Additional shirts may be available, inquire at registration on day of stroll.

Please indicate your desired size below and include \$12 for each T-shirt along with the \$10 individual registration fee or \$50 team fee.

T-Shirt Sizes:

____Adult Medium ____Adult Large
____Adult XL ____Adult XXL

Non-Profit Org.
US Postage
PAID
Valparaiso, IN 46383
Permit No. 423

STROLL FOR HOSPICE REGISTRATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: () _____

Email Address: _____

Team Registration:

(Please send team members' registrations together if possible)

_____ I am a Team Captain

Team Name: _____

Company Name: _____

_____ \$50 Registration fee for team of 6 or more enclosed
(See reverse for t-Shirt information)

\$ _____ for _____ t-shirts @ \$12 each

\$ _____ Total

Individual Registration:

_____ \$10 Registration fee enclosed

(No registration fee for children under 18 years of age)

\$ _____ for _____ t-shirts @ \$12 each

(See reverse for t-shirt information)

\$ _____ Total

**I am unable to participate, but am making a donation
to help support VNA Hospice: \$ _____**

Check Enclosed

Credit Card

Circle: *Visa-Mastercard-Discover-Amex*

_____ **Credit Card #**

_____ **Name as it appears on the card**

_____ **Cardholder Signature**

(Please make checks payable to VNA Foundation)

Join us for the 8th annual "Stroll for Hospice."

**Come walk in honor or memory of a loved one,
friend, neighbor or co-worker.**

**You may collect pledges or
donations from generous donors in
support of the VNA Hospice program.**

*(The enclosed donation form
may be reproduced.)*

**Registration: 12:00 noon
Stroll begins: 1:00 p.m.
Barbeque, awards & music to follow**

**Stroll begins at the
Visiting Nurse Association
501 Marquette Street in Valparaiso**
*(Additional parking available in the
IVY Tech lot, 2401 Valley Drive, just east of the
VNA and the VNA Hospice Center.)*

**Strollers, wagons and
well-behaved pets welcome!
You may also want to bring a
chair or blanket for the barbeque.**

**Please complete the attached form,
be sure to sign waiver on reverse
and mail registration form
and check to:**

**"Stroll for Hospice"
Visiting Nurse Association
501 Marquette St.
Valparaiso, IN 46383**

***You may also register online at
www.vnaportercounty.org
click the Stroll for Hospice link in the left menu.***

***Please register by April 6th to allow us to
plan for food and supplies.***

How to discuss Hospice with your sponsors

*Some people are unsure of what Hospice is.
Here are some concepts you can share with
those you are inviting to sponsor you.*

Hospice is a way
of caring that brings comfort to
persons living with a terminal illness
and gives support to them as well
as to their families.

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Hospice neither hastens nor
postpones death, but affirms life,
emphasizing quality, not length.
Patients live their final days with
peace and dignity.

.....

The Hospice team respects the
patient and family unit's right to
make decisions about his or her
own care. The goal of Hospice is to
enable terminally ill patients to
live life as fully as possible with a
spirit of hope and a sense of
personal satisfaction and worth.

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Hospice care was introduced to
Porter County by the VNA in 1983.
An inpatient facility was added
in 1994 in contracted space at
a local nursing home.
In February 2002, the Arthur B. and
Ethel V. Horton VNA Hospice Center
began accepting patients.

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Hospice can be provided in the
patient's home, home of a family member,
nursing home, assisted
living facility, private caregiver's
home or at the VNA Hospice Center.

2009 Stroll for Hospice PLEDGE FORM

Please list individuals making pledges or donations for your stroll. Any checks should be made payable to 'VNA Foundation'. Please bring the donations along with this form to the registration area on Sunday, April 19th.

Walker's Name: _____
 Team Name: _____

1.	Name/Team(if any)	Address	City/State/Zip	Phone	Donation
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(Donation form may be photocopied)

Matching Gift: \$ _____

Total: \$ _____