

## Stroll for Epilepsy 2015 Registration Form

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Contact #: \_\_\_\_\_

How did you hear about the Stroll?  
\_\_\_\_\_  
\_\_\_\_\_

Team Name: \_\_\_\_\_

Payment Enclosed:

- \$15 Child Registration (12 & under)
- \$ 30 Adult Registration ( 13+)
- I have epilepsy and would like to order a special purple shirt (Must be ordered by 1/16/15 to be guaranteed a shirt)

T- shirt size: Youth S M L

Adult S M L XL XXL

- I have signed the waiver on the back of this form

## Join us for the 2015 Stroll



*The Epilepsy Foundation of Greater Cincinnati and Columbus leads the fight to stop seizures, find a cure and overcome the challenges created by seizures.*

Epilepsy Foundation of Greater Cincinnati and Columbus

895 Central Avenue  
Suite 550  
Cincinnati, OH 45202

Phone: (513) 721-2905  
Fax: (513) 721-0799  
Toll Free: (877) 804-2241  
Email: efgcc@epilepsy-



January 31, 2015  
Polaris Fashion Place

8:30 a.m. Registration  
9:30 a.m. Treasure Hunt Begins  
11:00 a.m. Treasure Hunt closed & winners are drawn

Presented By:



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## Information

- ⑤ When: Saturday, January 31, 2015
- ⑤ Same day registration begins @ 8:30 a.m.
- ⑤ Stroll starts at 9:30 am. Awards at 11:00am
- ⑤ Early Registration and packet pick up will take place on Friday, January 30, 2015 from 5:00-8:00 pm in the Food Court of Polaris Fashion Place
- ⑤ Where: Polaris Fashion Place  
1500 Polaris Parkway  
Columbus, OH, 43240  
\*\* Begins in food court area
- ⑤ Who: Anyone who wants to support people with epilepsy and the work of the Epilepsy Foundation : Anyone who wants to win a gift card to Polaris Fashion Place
- ⑤ How: Complete and send in the form on this brochure or go to: [www.epilepsy-ohio.org](http://www.epilepsy-ohio.org) to register online

*Your participation in this event helps the Epilepsy Foundation provide valuable services to the community including: counseling, support groups, community education, camping programs, and much more! To find out more about the agency, go to : [www.epilepsy-ohio.org](http://www.epilepsy-ohio.org)*

## How it Works

A fun, family friendly event that all can take part in. All participants who register receive a colorful t-shirt and Treasure Hunt card. With the card, the participants walk throughout the mall visiting Treasure Hunt stops. At the stops, the participants will answer questions about epilepsy and receive a special stamp on their card. After visiting all the stops, the participants will then return to the food court area to enter their card into a drawing for a \$300, \$125, and \$75 gift certificate to the Polaris Fashion Place. There will also be live entertainment, a silent auction, and much more at the food court area!

### Want to Start a Team?

Join together with family and friends to start a team on our website. You can personalize your page with pictures and e-mail it to family and friends. All gifts to your team before the end of the year can be used as a tax deduction in 2014. Also, the more your team raises, the more prizes you win.

If you have 20 or more people sign up on your team by 1/16/15 you can have your team name put on the sleeve of your team member's shirts

Check it out at [www.epilepsy-ohio.org](http://www.epilepsy-ohio.org)

## Pay By:

- ⑤ Check: Mail registration form and check to:  
Epilepsy Foundation of Greater Cincinnati  
and Columbus  
895 Central Ave., Suite 550  
Cincinnati, OH 45202

- ⑤ Credit Card: Mail registration form with your credit card information to the address above:

- MasterCard
- Visa
- American Express

Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Amount: \_\_\_\_\_

Signature: \_\_\_\_\_

Online: [www.epilepsy-ohio.org](http://www.epilepsy-ohio.org)

\*\* Service fees apply

- ⑤ In consideration of the acceptance of my entry, I hereby waive on behalf of my heirs, executors and assigns all claims of any nature arising from my participation in the Stroll for Epilepsy and do hereby release the Epilepsy Foundation of Greater Cincinnati and Columbus, all sponsors, workers, officials and volunteers from any claim whatsoever arising from my participation in this event. I agree to abide by all the rules of participation, and acknowledge that the Event Committee may refuse or return my entry at its discretion. I understand the risks for participating in this event. I HAVE NOTED ANY MEDICAL CONDITION on this entry form. I will permit the use of my name and picture participating in this event for publicity.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Parent Signature (if under 18)