

# THE 1st ANNUAL Chattanooga Oral Cancer AWARENESS WALK



SATURDAY APRIL 10, 2010  
REGISTRATION 10:00 AM WALK 11:00 AM  
TENNESSEE RIVERPARK CHATTANOOGA, TN

Walker's Name \_\_\_\_\_  
Phone Number \_\_\_\_\_ E-mail \_\_\_\_\_

I am participating in the Chattanooga Oral Cancer Awareness Walk. All proceeds are to benefit THE ORAL CANCER FOUNDATION which will help raise awareness and promote early detection prevention. If you wish to sponsor me, please make a pledge. Please make checks payable to the Oral Cancer Foundation. All contributions are tax deductible. THANK YOU!!

	<u>Name</u>	<u>Address</u>	<u>Phone #</u>	<u>Email</u>	<u>Pledge Amt</u>
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____
7.	_____	_____	_____	_____	_____
8.	_____	_____	_____	_____	_____