



7708 New Utrecht Avenue, Brooklyn, NY 11214 * 917-509-9055 * info@rcsprogram.org

Reaching-Out Community Services, Inc.

8th ANNUAL WALK & SUPPORT AGAINST HUNGER

Walking to Take Hunger Off The Table

Saturday, October 15, 2016

**Location: Reaching-Out Community Services
7708 New Utrecht Avenue * Brooklyn NY 11214**

REGISTRATION 11 am

Walk Starts at 11:30 am along 18th Avenue and return to 77th Street & New Utrecht Avenue

**Show you're School Spirit – Walk with your School Banner!
Create A Team**

An official Walk Against Hunger T-shirt will be given to the first 200 participants who donates or raises \$25 or more on the day of the event!

Reaching-Out Community Services provides emergency food and other social services to low-income families and individuals in the Brooklyn Community.

To learn more about this event or to print extra Walk Registration Forms, please visit our website @ www.rcsprogram.org, or visit our  event page “8th Annual Walk Against Hunger 2016”

Don't Forget Tell Your friends About

***Brooklyn's Got Talent!*
Raise Your Voice Against Hunger
*CONTEST***

WINNER RECEIVES \$500 PRIZE

Waiver: In consideration of being permitted to participate in Reaching-Out Community Services Walk Against Hunger 2016 event, I hereby for myself, my heirs, my pet and my personal representatives assume any and all risks that might be associated with the event.

I _____ on behalf of myself, my child, my pet and any person who might seek to recover damages for injury to me, my child or my child's property or my pet, further waive, release, discharge and covenant not to sue or make claim against Reaching-Out Community Services, Milestone Park, the City of New York, or any of their officers, affiliates, employees, sponsors, organizers, members, volunteers or other representatives or their successors and assigns, for any and all injuries, including personal injury or death, or damages of any kind whatsoever, caused or incurred by me relating in any way to my participation, of my child or my pet in the event or in any related activities. I also agree to the use of any photo film, or videotape of the event, and of my or my child's name or pet's name, voice, picture and portrait for any purpose. I also give my full permission for such first aid as deemed necessary to be provided to me, my child or my pet on the premises or prior to transport to a hospital for further treatment.

Participant/Guardian Signature: _____ Date: _____