

Join the Journey 2018 Breast Cancer Awareness Walk
Scholarship Application Instruction Sheet

Join the Journey grants twenty walk scholarships per year to individuals who are unable to pay the Walk Registration Fee but who greatly wish to show their support for breast cancer survivors in our community by participating in the walk.

Join the Journey will use this application process to select the recipients of these walk scholarships. No more than twenty per year will be provided. Join the Journey will give precedence to applicants who are breast cancer survivors or who are the immediate relative of someone who has been diagnosed with breast cancer (father, mother, sister or brother; son or daughter; and grandmother or grandfather).

Deadline for submitting application: August 1, 2018

All applications must be completed and signed with t-shirt sizes included by the deadline above. Applications received after the deadline will not be considered.

If your application is not accepted, please try again next year. Please note that there are other ways to participate in the walk free of charge. One way is by being a volunteer. We have many volunteer opportunities; please contact our Volunteer Coordinator at info@jointhejourney.us for more information. Another option is to pay your Walk registration fee using donations you've solicited from your friends, family and co-workers for Join the Journey.

Please note that this event is a fundraiser designed to raise awareness but also to raise money to support our programs for breast cancer survivors. Any funds that applicants can raise in support of breast cancer survivors is always greatly appreciated.

Join the Journey 2018 Breast Cancer Awareness Walk
Scholarship Application

1. Applicant's First Name:	2. Applicant's Last Name:
3. Date of Birth:	4. Address:
5. Phone:	6. Email Address:
7. Are you a Breast Cancer Survivor? <input type="checkbox"/> Yes <input type="checkbox"/> No	8. Has your mother, father, sister, brother, son, daughter, grandmother or grandfather been diagnosed with breast cancer? <input type="checkbox"/> Yes <input type="checkbox"/> No
9. My Tshirt Size Is:	
<input type="checkbox"/> Small (youth) <input type="checkbox"/> Medium (youth) <input type="checkbox"/> Small (adult) <input type="checkbox"/> Medium (adult)	<input type="checkbox"/> Large (adult) <input type="checkbox"/> XLarge (adult) <input type="checkbox"/> XXL (adult) <input type="checkbox"/> XXXL (adult)
10. Why do you wish to participate in the Breast Cancer Awareness Walk?	

Join the Journey 2018 Waiver and Release

I wish to participate in the Join the Journey 10-mile walk. I will be using public streets and facilities, including paddling on Silver Lake, where many hazards exist and I am aware of and appreciate the risks that may result. I am also aware that accidents may occur during this event which could result in serious injury or death. I am voluntarily participating in this event with knowledge of the dangers involved and I agree to accept all risks of injury or death. I should not participate in activities unless I am medically able and properly trained and by my signature, I certify that I am medically able and properly trained. I hereby consent to receive medical treatment that may be deemed advisable in the event of injury, accident and/or illness during this event. I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video or film, likeness to be used for any legitimate purpose by the event holders, sponsors, organizers and assigns. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I for myself and anyone entitled to act on my behalf, waive and release Join The Journey and their respective employees, sponsors, officials, organizations, friends of the event, spectators, volunteers now or in the future, for any claim, loss or liability that I may have arising out of my participation in the event, including bodily injury, death or property damage whether caused by negligence or carelessness of their leases or otherwise. I have read and understand this waiver and release.

Applicant Signature _____

Please send this signed form via mail or email to:

Join the Journey
1530 Greenview Drive SW, Suite 212
Rochester, MN 55902
info@jointhejourney.us

Approval by the Join the Journey Board of Directors has been:
Granted: _____ Not Granted: _____