



## Brain Injury Alliance of Wisconsin 15<sup>th</sup> Annual Walk for Thought Registration Form

Team Captain \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

Estimated Team Size \_\_\_\_\_ T-Shirt size \_\_\_\_\_

My team plans to participate in the:

\_\_\_\_\_ Appleton/NE Wisconsin Walk Sept. 15 (Telulah Park)

\_\_\_\_\_ Madison Walk Sept. 22 (At the Capitol King St. Entrance)

\_\_\_\_\_ Wausau Sept. 29 (Oak Island Park)

\_\_\_\_\_ Brookfield/Milwaukee Walk Oct. 6 (Fox Brook Park)

Additional names and T-shirt sizes (use back of page if necessary):

Please return this form to [kcurtis@biaw.org](mailto:kcurtis@biaw.org) or mail it to

BIAW,

6409 Odana Rd. Suite 1H,

Madison, WI 53719.

Questions? Call 262-790-9660 or 608-206-6426