

WHAT:

Fundraiser to support Grady County's Intervention & Crisis Advocacy Network (ICAN!) and to raise awareness about domestic violence.

WHERE:

Check-in at YMCA parking lot. Walk down Chickasha Ave. to the Rock Island Depot. Parking at the Grady County Courthouse with shuttle service.

SCHEDULE:

8:45-9:45 a.m.

Parking shuttle service from Grady County Court House

8:45-9:45 a.m.

Check-in and late registration (pick-up t-shirts).

10:00 a.m.

Walk begins

Program and awards presentation to follow

REGISTER:

<https://www.icancrisisnetwork.com/togetherweheel2022>

Call

405-224-4770 or 405-224-8256

Scan/Email or Mail the form on the back of this flyer.

DEADLINES:

Thursday, September 15
(by 10 a.m)

T-shirt's to wear at the walk cannot be guaranteed for registrations after Thursday, September 15

AWARDS:**Group**

- **Together We Heel Top Team**
- **Together We Heel Top Donor**

Individual

- Best Dressed
- Hottest Heels
- High Roller
- Youngest Participant

Join the men and women of Grady County as they don their heel shoes for a 1/2 mile fun walk to raise awareness and show support for victims of domestic violence.

GUYS AND GALS WEAR YOUR CRAZIEST HEELS!!



Sponsorship/Entry Opportunities

Platform Heel Sponsor – \$1000

Logo on all promotional materials (including t-shirts), all marketing and media materials, 10 entries to walk, and t-shirts for walkers. Your company may distribute merchandise or promotional materials to be included in event participants' race packets

Stiletto Heel Sponsor – \$500

Logo on all promotional materials (including t-shirts), name on all marketing and media materials, 10 entries to walk, and t-shirts for walkers

Pump Heel Sponsor – \$250

Name on all marketing/media materials, five entries to walk, and T-shirts for walkers

Kitty Heel Sponsor – \$150

Name on all marketing/media materials, three entries to walk, and T-shirts for walkers

Individual Walker – \$25

One entry to walk and t-shirt.

Questions?

Neely Alexander, 405-224-4770
Matt Whetzel 405-224-8256

Who are we?

The Grady County Coordinated Community Response (CCR) Team is comprised of representatives from the DA's office, law enforcement and support agencies throughout the county. The CCR Team's goal is to coordinate efforts to assist and protect victims of domestic violence and sexual assault and ensure that perpetrators are held accountable for their actions.

Together We Heel 2022 Registration

Sponsorship/Registration Level

- \$1000 Platform Heel Sponsor
- \$500 Stiletto Heel Sponsor
- \$250 Pump Heel Sponsor
- \$150 Kitty Heel Sponsor
- \$25 Individual Walker

Business/Organization/Team Name _____

Number of Walkers _____

Please complete the form and release below

Make checks payable to **Grady County CCR Team**. Check must accompany registration.

Signed **WAIVERS** for **each walker** must accompany registration. Please make copies of this form for every member of your team. Additional walkers need to complete the waiver only.

Add \$3 for XXL and larger t-shirt orders.

Mail this form to Neely Alexander; District Attorney's Office; 201 N 4th Street; Chickasha, Oklahoma 73018 or Matt Whetzel, ICAN, PO Box 1539, Chickasha, OK 73023

- or -

Scan and email this form to neely.alexander@dac.state.ok.us or matt@icancrisisnetwork.com

Walker's Name

T-Shirt Size
(\$17 for 2XL or larger size)

Group Contact _____

Phone _____

Email _____

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Registration available online at
[https://www.icancrisisnetwork.com/
togetherweheel2022](https://www.icancrisisnetwork.com/togetherweheel2022)
or call 405-224-8256

2022 Waiver and Release of Liability for Participants

Every team member who is walking needs to complete this form.

Name _____

Phone _____

Email _____

Date of Birth (if under 18) _____

Emergency Contact

Name _____

Phone _____

Relationship to Walker _____

In consideration for being permitted to participate in the "Together We Heel" event, I agree to assume all risks inherent in participation in such program, whether they are apparent to me or not. I certify that I am in good physical health and fit to participate. Nevertheless, I acknowledge that participation carries an inherent risk of injury to my person and damage to my property. I hereby waive and release, for myself and for my heirs and assigns, any and all claims, causes of action, or liabilities which may hereafter accrue against Grady County Community Response Team, Grady County District Attorney's Office, Intervention & Crisis Advocacy Network, and the City of Chickasha, their agents, employees, volunteers, officers, directors, successors and assigns, and any and all sponsors, their representatives and successors, that may arise as a result of my participation in Together We Heel, including any and all claims for personal injuries caused by any above named organizations' negligence.

Further, I hereby grant full permission to any and all of the foregoing to use any photographs, motion pictures, recordings, or any other record of these events for any legitimate purpose, including commercial advertising, without monetary payment to me. (This information is protected by the Privacy Act).

Signature of Participant _____

Date _____

This section to be read and signed by parent/legal guardian if participant is a minor:

As the parent/legal guardian of the above-named participant, I hereby waive and release on behalf of my child, any and all claims, and causes of action, or liabilities which may hereafter accrue against Grady County Community Coordinated Community Response Team, Grady County District Attorney's Office, Intervention & Crisis Advocacy Network, and the City of Chickasha and its affiliates, their agents, employees, volunteers, officers, directors, successors and assigns, and any and all sponsors, their representatives and successors, by reason of my child's participation in said program, including any and all claims for personal injuries caused by any above named organizations' negligence. In addition, I accept full responsibility for the care and supervision of my child during the walk.

Printed Name of Parent/Legal Guardian _____

Signature Parent/Legal Guardian _____

Date _____