



LINCOLN-TRUMAN CAPTURE THE COLOR WALK / RUN

Saturday, September 22nd, 2018

Registration: 1:00 pm ~ Start: 2:00 pm

Scottish Rite Masonic Bodies
Valley of Southern Illinois
1549 Frank Scott Parkway W.
Belleville, IL 62223

Registration Fee: \$25 (Includes t-shirt, packet and award celebration.)

Participants are highly encouraged to secure sponsors as well. A portion of registration fee and sponsor donations will be donated to the HIKE Fund. Any participant raising \$128.00 in sponsor funds will receive the 2018-19 HIKE pin and charms.



For more information contact:
5KforHIKE@gmail.com



TIME FOR LINCOLN-TRUMAN HIKE – CAPTURE THE COLOR!

August 14, 2018

To the Honored Queen, Daughters, and Adults of Illinois Job's Daughters:

It's time for our Annual Lincoln-Truman HIKE and we are very excited to announce that this year's HIKE event will be a color event! Participants will walk/run the 5K (3 mile) course and be "decorated" with color at various "color stations" throughout the course. We will NOT, however, be providing times for walkers/runners as (admittedly) we are not professionals and we would rather give monies to the HIKE Fund than hire a professional company required to do so.

Registration is \$25.00 per participant and includes a registration packet – a "get color" t-shirt, sun glasses, a few other registration goodies, the awards celebration following the walk/run, and of course a portion donated to the HIKE Fund. Please complete the enclosed Registration Form and mail with your registration payment to Aunt Cathy Evans (see form) to be received no later than September 5, 2018. Due to the time constraints, you may email your registration form by that date as long as the payment check is postmarked by that date as well.

All participants are requested (and highly encouraged) to utilize the enclosed sponsor form to secure additional donations for the HIKE Fund. Who do you know that will pledge/sponsor you to walk/run to raise funds for this worthwhile cause? Daughters that raise \$128 in sponsors (NOT including the \$25 registration fee) will earn their HIKE pin with all 5 charms for 2018-19. Don't forget there is also an "I Love You" hand charm for additional \$50 donation AND there are Bronze, Silver & Gold charms for total dollars raised! To view this year's pin or get more information on this year's HIKE incentive program, please visit: <https://thehikefund.org/hike-coordinators-corner/contests-and-awards>.

Please do NOT mail any pledge/sponsor sheets, or those monies, with registration. They should be brought to the Registration table the day of the event with Medical & Media release forms. All participants MUST have Medical & Media Releases. Registration will open at 1:00 p.m., with the walk/run starting at 2:00 p.m. PLEASE arrive as close to 1:00 p.m. as possible to check-in so we can be organized and ready to "step-off" at 2:00 p.m.

This is an "open" event so feel free to invite your Bees, Rainbow Sisters, DeMolay Brothers, friends and family to participate – just make sure that every participant is registered with your Bethel, meeting the deadlines above. The more participants, the more fun we will have!

If you have any questions, please call either myself or Aunt Cathy Evans, or send an email to the LT HIKE email address found on the forms. Excited to color your world for the HIKE Fund!

Aunt Lucinda Crispin
Lincoln-Truman HIKE Chairperson
(217) 316-6238

This communication has been approved by the Grand Guardian

TIME FOR LINCOLN-TRUMAN HIKE – CAPTURE THE COLOR!

To our friends in Missouri Job's Daughters:

Please find enclosed our communication, and accompanying registration/flyer/sponsor sheets, for the upcoming Lincoln-Truman HIKE.

This year, we are asking that Missouri Bethels/participants register in the same manner as the Illinois Bethels, with the registration forms and accompanying payments sent via the deadline/manner outlined in the communication. We need to ensure the registration monies are collected well in advance to order the walk/run race kits from the supplier.

We are very excited and hope that this is the start of something GREAT and new and fun for the LT HIKE. Let's raise lots of money for the HIKE Fund together! Please feel free to contact us if you have any questions or need anything at all. We look forward to seeing a ton of our Missouri friends in Quincy, Illinois this year.

The Illinois LT HIKE Committee



Hearing Impaired Kids Endowment

The HIKE Fund, Inc.
Hearing Impaired Kids Endowment Fund, Inc.
The Philanthropy of Job's Daughters International®
(Tax ID # 36-3406438)

SPONSOR SHEET

Please type or clearly print all information.

HIKE Event Date: _____

Name: _____ Phone Number: _____

Email Address: _____

Mailing Address: _____

Bethel Number and Location: _____

Please make checks payable to: **The HIKE Fund, Inc.**

SPONSOR NAME, ADDRESS, PHONE, EMAIL (include date of check and check #)	AMOUNT COLLECTED
TOTAL	\$

JOB'S DAUGHTERS INTERNATIONAL

Bethel No. _____ City _____ State/Province _____

RELEASE AND CONSENT FORM

Date: _____

This form is to be maintained in the applicable Bethel Guardian Council files and reviewed/updated as required annually with the Health Information Form 125A prior to January 5th of each year.

1. We, the undersigned Parents or Legal Guardians of _____ (Daughter) do hereby give consent and permission for her to participate in approved Job's Daughters International (JDI) events and activities conducted at the Supreme, Grand and/or Bethel level ("Events") WITH THE FOLLOWING EXCEPTIONS: (State EXCEPTIONS on the line below:)

2. We do hereby authorize the members of Supreme/Grand/Bethel Guardian Councils and/or JDI Certified Adult Volunteers (CAVs) to exercise supervision of our Daughter during the time she is participating in Events in accordance with all current JDI Laws, Policies and the JDI Youth Protection Program.
3. We are fully aware that any Events, including athletic types of activities, have a given amount of inherent risk for injury. In the event of injury or illness to the above named Daughter, we, the undersigned Parents or Legal Guardians, hereby authorize any JDI Certified Adult Volunteer (CAV) in attendance to secure medical assistance from any licensed physician in attendance to provide such emergency treatment as shall be necessary, including but not limited to hospitalization, injections, anesthesia, surgery, x-ray, blood and medications. We understand that every reasonable effort shall be made to contact us prior to medical treatment.
4. Job's Daughters International does not maintain medical insurance for its members. We understand that we will be responsible for any and all costs of medical services and treatment(s) incurred by or on behalf of our Daughter. Our current contact information, family health insurance carrier and policy number are listed in her Personal Health Form (Form 125A).
5. We hereby agree to release and hold harmless Job's Daughters International, Supreme/Grand/Bethel Guardian Councils and applicable CAVs from any and all claims or cause of action which the undersigned has or may have. This specifically includes any and all claims which arise out of attendance at Events, including transportation to and from said Event(s).
6. The above consents and waivers will remain in full force and effect, unless cancelled in writing by the undersigned Parents or Legal Guardians.
7. Our Daughter _____ is _____ is not (check one) age 18 or older or legally responsible for herself under the law.

Father or Legal Guardian Signature: _____ Date: _____

Mother or Legal Guardian Signature: _____ Date: _____

Daughter's Signature: _____ Daughter's Age: _____