



**Please register your Walk Team by completing this form. Use this form or register online by going to [www.WalkForMentalWellness.com](http://www.WalkForMentalWellness.com)**

Team Name: \_\_\_\_\_

Representing: \_\_\_\_\_  
(Individual Walking in Honor of or Company/Group Name)

Team Captain Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Questions? Call/Email Melinda or Cheri**

**Melinda Gotzy**

**P: 610-775-3000**

**E: [melindagotzy@grmha.org](mailto:melindagotzy@grmha.org)**

**Cheri Burkert**

**P: 484-318-9101**

**E: [cheriburkert@grmha.org](mailto:cheriburkert@grmha.org)**