

SPONSORS:

**ST. AGNES CHRISTIAN
FORMATION-YOUTH
MINISTRY**

REGISTRATION INFO:

A 2- MILE COURSE

9:15 to 9:45AM CHECK-IN

10:00AM RACE STARTS

**NO BIKES, ROLLERBLADES,
SKATEBOARDS OR PETS
ALLOWED!!!**

**STROLLERS & WHEELCHAIRS
ALLOWED.**

HOSTED BY:

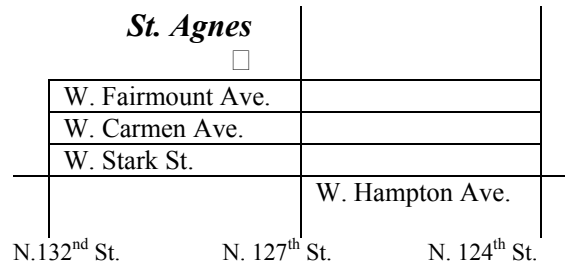
ST. AGNES YOUTH BOARD

**THE MONEY RAISED IN THIS
EVENT WILL GO TO SUPPORT
LEUKEMIA RESEARCH UNDER THE
DIRECTION OF SAM'S DOCTOR:
DR. DAVID MARGOLIS AT THE
MEDICAL COLLEGE OF WISCONSIN**

TO GET THERE:

**St. Agnes Parish - 12801 West
Fairmount Avenue, Butler, WI**

**Hampton Avenue west to 127th
Street north to Fairmount
Avenue west to St. Agnes**



****TWELFTH ANNUAL ****

**SAM
MEMORIAL
WALK / RUN**



**HONORARY RACE STARTER
CATHY BISSWURM-VOGEL
(Sam's Mom)**

**SATURDAY
AUGUST 27th, 2011
ST. AGNES PARISH, BUTLER**

***IF YOU CAN'T JOIN US AND
WOULD LIKE TO MAKE A
DONATION PLEASE SEE
INFORMATION INSIDE***

FACTS ON SAM

- ❖ Kindergarten student at St. Agnes from 1999-2000
- ❖ Was diagnosed with AML Leukemia at the age of 4.
- ❖ Underwent a bone marrow transplant from an unrelated donor in January of 2000.
- ❖ Passed away at the age of 6 in April 2000.
- ❖ Sam is an inspiration to many and is missed by his family, friends and classmates.

Please join us to help raise money to find a cure.

Thanks to your support over the years we have:

- Raised over **\$101,000**
- We have advanced procedures in safer bone marrow transplants by focusing on treating Graft vs. Host which is something that Sam suffered from.
- We work very closely with Dr. Margolis and know where all the funds go
- Check out our website: www.golf4sam.com for updates.

If you can't make the event and would like to make a donation please send it to:

Sandy Bisswurm (Sam's Grandmother)
14340 Flora Ave
Brookfield, WI 53005

**Make checks payable to:
St. Agnes Parish.**

PLEDGE SPONSOR INFORMATION

Acquiring pledges is suggested, but not required to participate in the run.

Money must be submitted on the day of the race.

Walk / Run Participant
Address
Area Code and Phone

Sponsor's Name	Pledge Rec'd
1	
2	
3	
4	
5	
6	
7	
TOTAL	\$

TWELFTH ANNUAL SAM MEMORIAL WALK/RUN REGISTRATION – 2011

\$15.00 INDIVIDUAL
 \$40.00 FAMILY
 \$ _____ OTHER DONATION

Last Name _____ First _____

Address _____

City _____ State _____ Zip _____ Phone _____ Age _____
 Male Female Family Runner Walker
 Type of Participant: _____

Please read and sign release: I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this event including, but not limited to falls, contact with other participants, and the effects of the weather including high heat and / or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. 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 St. Agnes Parish, the Village of Butler and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise from negligence or carelessness on the parts of the persons names in this waiver, (Entry must be signed by participant or legal guardian if participant is under 18years of age.)

Signature _____ Date _____