



## **Lyme Disease Awareness Walk/Fun Run Registration Form**

**Title:** Dr Miss Mr. Mrs. Ms

**Name:** \_\_\_\_\_

**Mailing Address:**

\_\_\_\_\_  
\_\_\_\_\_

**Phone:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

### **Registration fee: \$10.00**

Please include registration fee in form of cash, check or money order when returning your form. We will send you a confirmation/receipt via e-mail or mail upon request.

Send form and payment to:

**Lyme Disease Awareness Walk C/O Jessica Platanitis  
236 Main Street #2  
Saco, Maine 04072**

Make all checks payable to Lyme Disease Awareness Walk

**Any questions please contact:**  
Jessica Platanitis (207) 251-0658 or  
[lymeawareness@gmail.com](mailto:lymeawareness@gmail.com)

# **Thank you for your support!**