

So Many Ways to Register:

MAIL

Complete the attached application and mail to:
Central Nassau Guidance and Counseling Services
950 South Oyster Bay Road
Hicksville, NY 11801

ONLINE

Visit www.centralnassau.org and click on the link to our safe and secure registration page. Once you register, you can email your Walker/Team page to your friends and family and ask them to support your efforts. It's that simple!

PHONE OR EMAIL

(516) 396-2771
or email: ggallagher@centralnassau.org

So Many Ways To Help:

CELEBRATE WITH US

Join us on Saturday, May 23rd!

INVITE OTHERS TO JOIN IN

Challenge others to follow your lead by walking with you on May 23rd or sponsoring your efforts.

CREATE A WALK TEAM

Recruit a walking team of your coworkers, friends and/or family. Motivate and challenge each other to raise more funds for Central Nassau.

PUBLICIZE

Help us get the word out! Talk the Walk up amongst your friends, display our publicity materials, post a notice in your company newsletter...the options are endless!

Sponsorship and advertising opportunities are also available.

OUR FULL RANGE OF PROGRAMS AND SERVICES INCLUDE:

Assertive Community Treatment
Blended Case Management Services
Community Program
Connections Clubhouse
Counseling Center
MICA Residential Recovery Program
Residential Services
Mental Health Services for the Deaf and Hearing Impaired
The Starry Night Cafe
The Haven Continuing Day Treatment Program

VISIT OUR WEBSITE FOR MORE INFORMATION:
WWW.CENTRALNASSAU.ORG

Want to fundraise or register your Team online?
visit: www.centralnassau.org/Special_Events

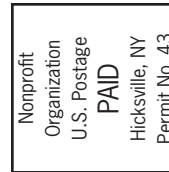


Serving Nassau and Suffolk County

(516) 822-6111

www.centralnassau.org

Central Nassau is licensed and supported by: the Nassau County Department of Mental Health, Chemical Dependency, Mental Retardation and Development Disabilities Services; New York State Office of Mental Health; New York State Office of Alcoholism and Substance Abuse Services; New York State Office of Mental Retardation and Developmental Disabilities; Suffolk County Community Mental Hygiene Services; U.S. Dept. of Housing and Urban Development (HUD). A member agency of the United Way of Long Island, Hicksville Chamber of Commerce, and the Long Island Association.



950 South Oyster Bay Road
Hicksville, NY 11801

CENTRAL NASSAU

Join us for the 2009
**Walk For
Central Nassau**
SATURDAY, MAY 23RD

sponsored by

THE **ALCOTT GROUP**
The HR Solution for Your Growing Business

 **M&T Bank**



Join our staff, clients, family members and friends

for this non-competitive, 2-mile walk on Saturday May 23rd to support Central Nassau in responding to the desperate call for help from individuals and families struggling with mental health and/or substance abuse issues.



With 1 in 5 families on Long Island confronted with this challenge, the lives you will help rebuild may be those of your friend, neighbor or loved one. It's that close to home.

Please open up your heart by registering to walk, creating a Team, and/or donating.

Central Nassau Guidance & Counseling Services offers a lifeline of hope

to those struggling with mental health and/or substance abuse issues. We have been responding to the call for help through our comprehensive network of community-based services since 1972.

Our strength is our diversity

and our reputation has been built by the commitment of our professional staff, distinguished Board of Directors, supportive volunteers, and many generous donors. Everyone works together to improve the quality of life for those we serve.

**Walk For
Central Nassau**
SATURDAY, MAY 23RD

LOCATION:

**950 South Oyster Bay Road
Hicksville, NY 11801**

REGISTRATION BEGINS:

7:30 am

T-Shirts will be distributed at registration

WALK BEGINS:

9:00 am sharp

WALK ENDS:

10:00 am

LENGTH OF WALK:

2 Miles

Advanced registration requested

DETACH REGISTRATION FORM AND MAIL TO:

Central Nassau Guidance and Counseling Services
950 South Oyster Bay Road
Hicksville, NY 11801

TEL: 516-396-2771

FAX: 516-396-0553

EMAIL: ggallagher@centralnassau.org

WALK FOR CENTRAL NASSAU 2009 REGISTRATION FORM

- I would like to register as a WALKER. My name is: _____
- I would like to register as a TEAM MEMBER. My Team Name: _____
- I will be unable to walk, but would like to CONTRIBUTE. Enclosed is my donation of \$ _____

NAME _____

ADDRESS _____

CITY _____

STATE _____

ZIP _____

PHONE _____

EMAIL _____

| SPONSORS NAME | ADDRESS | CITY/STATE/ ZIP | PHONE | AMT DONATED |
|-------------------------|-----------------|----------------------|----------------|-------------|
| sample: Elizabeth Jones | 567 Pine Street | Hicksville, NY 11801 | (516) 555-1234 | \$25.00 |
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YOU MAY PHOTOCOPY THIS FORM IF YOU NEED MORE SPACE FOR SPONSORS

- Additional sponsors continued on separate sheet

MAKE CHECKS PAYABLE TO:

CENTRAL NASSAU GUIDANCE AND COUNSELING SERVICES

TOTAL SPONSOR DONATIONS COLLECTED _____

send to:

Central Nassau Guidance and Counseling Services

950 South Oyster Bay Road

Hicksville, NY 11801

or call (516) 396-2771

or visit www.centralnassau.org for more information on how you can help.

Central Nassau Guidance and Counseling Services is a 501 (c)3 organization.

PERSONAL DONATION _____

TOTAL _____

**Thank you
for your
support!**

In consideration of your accepting this entry, I the undersigned, intending to be legally bound for myself, executors, and administrators, waive and release any and all rights and claims for damages I may have against CNGCS, Nassau County, The Town of Oyster Bay and all walk sponsors, their representatives, successors, and assigns, for any and all injuries suffered by me in said event. I attest that I am physically fit, and have sufficiently trained for the completion of this Walk, that I am aware of the considerable risks of participating in such an event, and that a licensed medical doctor has verified my physical condition. Further, I hereby grant full permission to any and all of the foregoing to use any pictures, or any other record of this event for any purpose whatsoever. If signed by a parent, the parent agrees to release and hold the above organizations and persons harmless of any claims and/or rights, which may be asserted on behalf of the entrant.

Signature _____ Parents Signature (if under 18 years old) _____

No skates, rollerblades or animals permitted for the safety of participants.