

## SOUTHEASTERN CORRECTIONAL MINISTRY, INC.

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# 4<sup>TH</sup> ANNUAL FOOT SOLDIERS WALK

SATURDAY August 26, 2017

Check-in 10:00 am

Walk 10:30 am

(Rain or shine)

*We need your help!*



Enjoy a hotdog picnic lunch afterwards. Make it an outing for your family or church group



Walk with us or support by giving and joining us for a time of fun and fellowship

*Bring a side or dessert to share for lunch*



Mount Trashmore Park

310 Edwin Drive

Virginia Beach, VA 23462

Picnic shelter #5

### WHO ARE WE?

SCM Ministry is a non-profit organization that ministers to the inmates in correctional facilities. It provides Bible teaching, Bible studies, counseling, literature and other programs to the incarcerated.

### HOW CAN I HELP?

Tell your family, friends, co-workers, neighbors, church family, etc. about the work of SCM. Ask them to support you with a ONETIME donation. Then, collect the contribution and fill out the sponsor sheet on the back of this flier. Bring it with you on the morning of the walk or mail it to the Ministry office. Make sure you designate it as a Walk contribution.

**Please do NOT mail cash – Call for a donation pickup!**

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Name Fund Raiser (Person) \_\_\_\_\_  
 Organization/Team/Church \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone Number \_\_\_\_\_ E-Mail \_\_\_\_\_

Last Name	First Name	Address OR Email	City	State	Zip	Amount	Cash	Chk#
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								

**Recommend 10 - \$10 donations.**

Total

You do not need to walk to be a part of this campaign

I, \_\_\_\_\_ certify that I am fully capable of participating in this activity. Therefore, I assume and accept full responsibility for myself, including all minor children in my care, custody, and control, for bodily injury, death or loss of personal property and expenses as a result of inherent risks and dangers not specifically identified, and as a result of my participating in this activity.

I have carefully read, clearly understood and accepted the above terms and acknowledge that this agreement shall be effective and binding upon myself, my heirs, personal representative and estate and for all members of my family, including minor children.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Signature of Parent or Guardian (if participant under 18 years) \_\_\_\_\_

Date \_\_\_\_\_

*Each person walking must turn in a signed form ~ Make checks payable to SCM ~ Online giving at [www.secorrmin.com](http://www.secorrmin.com)*

*Call 757-723-5626 to have your contributions picked-up if you don't plan on walking*