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Sponsorship/Registration: Walk-A-Thon for Stem Cell Research

Heckscher State Park, East Islip

MAY 15th Register at 9:30; Step off at 10:00 A.M. RAIN OR SHINE

Please register by filling out the form below. Thank you

Dear Hadassah Members and Friends,

Those of you who attended our walkathon for Stem Cell Research last year, know what a hit it was. We danced to a live band, had refreshments, exercised and chatted with friends. Best of all, we raised money to further Stem Cell Research at Hadassah Hospital. On May 15th, 2016 we will hold our third annual walkathon and we would love to see you there.

Cures for Parkinson's disease, diabetes, multiple sclerosis & ALS through Stem Cell Research are so close and Hadassah researchers are already putting to use what they have learned to relieve suffering and even reverse some symptoms. Breakthroughs come through dedication, hard work and innovation. Success is no accident. But all this takes funding and that's why we're turning to you.

Join us as we walk a circuit through Heckscher State Park. We will even have **live music and refreshments** to make the journey more fun. **Registration is still only \$20 per individual, \$36 per family; T shirts will be distributed to participants on the day of the walk on a first come first serve basis.** Register by using the coupon below, and set a goal of your own to be met by asking family, friends and co-workers to sponsor you. Get excited and they will, too. Ask them to help you reach your goal so we can reach ours. **Sponsors who contribute \$250 or more (received by April 20) will have their name prominently displayed at the signage site and along the route. All of you will have the gratitude of generations to come.**

Yours truly,

2016 Walkathon Committee

___ Count me in. I'll walk with you on May 15th, 2016. (Registration is \$20 per individual, \$36 per family)

___ Here is my contribution. I wish to sponsor the person listed.

___ \$1,000 ___ \$500 ___ \$250 ___ \$180 ___ \$100 ___ \$54 ___ \$36 (family) ___ \$20 ___ \$18 ___ \$10 ___ Other

Registrant/Contributor name _____

Address _____ City, State, Zip _____

Phone # _____ Email _____

Sponsoring (indicate if self) _____

Chapter _____

Make your check payable to **Hadassah** and mail to:
Hadassah c/o Sandy Emmerich
3 Dove Lane
Smithtown, NY 11787-2103