


Women's Care
 CENTER
 P.O. Box 4765
 Parkersburg, WV 26104

*Embrace
 Hope*

Non-Profit Org.
 US Postage
 PAID
 Parkersburg, WV
 Permit No. 212

OCTOBER 15, 2023

PARKERSBURG CITY PARK
 CHECK-IN & LUNCH - 12:30 P.M. • WALK ACTIVITIES - 1:15 P.M.

YOUR SUPPORT HELPS

Your support helps provide accurate information and compassionate assistance to women, families, and students every year. We offer comprehensive, positive alternatives to abortion.

OUR SERVICES

- Pregnancy Testing
- Options Education
- Limited Obstetrical Ultrasounds
- STD Testing and Treatment
- Sexual Risk Avoidance Classes
- Sweet Blessings Boutique

questions? 304.485.7122
yourwcc.com/walk2023

WALK FOR THE UNBORN!

- Collect no money!
- Only a 2 mile walk.
- Come rain or shine.
- Free T-shirt for \$200 in pledges.
- Free Sweatshirt for \$300 in pledges.

STEP 1:

Pre-register online at: yourwcc.com/walk2023 or complete and mail the attached registration form by Friday, September 29th.

STEP 2:

Ask EVERYONE you know to sponsor you. You will be amazed by how many will say YES!

STEP 3:

Please be sure all names and addresses are complete and easy to read. Bring your completed Pledge Form(s) the day of the Walk (or walk on your own and mail it in). Don't collect any money. We'll handle the billing.



The Lemon Family
 in memory of
 Curtis Lemon



*Embrace
 Hope*
 and
*Walk for
 Life!*




Women's Care
 CENTER

SUNDAY, OCTOBER 15, 2023

PARKERSBURG CITY PARK
 CHECK-IN & LUNCH - 12:30 P.M.
 WALK ACTIVITIES - 1:15 P.M.

SPONSOR Form

MY GOAL _____ TOTAL _____

Bring this completed form to the walk. You may photocopy this form for additional pledge space or download a PDF from our website.

Walker's Name _____ Phone _____

Address _____ City, State, Zip _____

Email _____ Church/Group _____

questions? 304.485.7122
yourwcc.com/walk2023



Please print all information clearly. Make checks payable to Women's Care Center. No need to collect money; we handle the billing!

First		Last	
Address			
City	ST	Zip	Phone
Email			
<input type="checkbox"/> PAID <input type="checkbox"/> BILL ME <input type="checkbox"/> \$25 <input type="checkbox"/> \$35 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> Other \$ _____			

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PRE-REGISTER TODAY!

Return this pre-registration slip by Friday, September 29th
Women's Care Center, PO Box 4765, Parkersburg, WV 26104 or www.yourwcc.com/walk2023

Name: _____ Phone _____

Address _____

Email _____ Church Group _____

I am unable to walk, but will make a donation of \$ _____ payable to Women's Care Center.
Online donations can be made at www.yourwcc.com/give.

Print Clearly Please!

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