

WOMEN & INFANTS HOSPITAL DAY PROGRAM

For the treatment of Postpartum Depression

Postpartum Depression is a condition that affects thousands of mothers, children and families. It is a condition that can become very serious – even life-threatening – if not treated with medical care and respect.

The Women & Infants Hospital Day Program is a unique program that treats pregnant and postpartum women who are suffering from depression, anxiety, and other mood disorders. This innovative service allows mothers and babies to remain together in a specialized treatment program, providing them with counseling, medical treatment, support groups, and more.

The Day Program was the first program of its kind and serves as a national model for hospitals throughout the country.

Stepping Out of the Darkness – the first annual 5K walk/run fundraiser in support of the Women & Infants Hospital Day Program – will raise crucial funds to support this program and increase awareness of postpartum depression and the impact it has on mothers, infants, and families in our community.

Your participation in this event will demonstrate your commitment to a program that has made a difference to hundreds of women and families in Rhode Island, Southeastern Massachusetts, and the surrounding region.

REGISTRATION

\$18 online at www.needtorace.com or by mail – deadline May 8, 2008.

\$20 in person on race day, starting at 8:00am on the grounds of Daggett Farm at Slater Memorial Park.

Registration fees are non-refundable.

T-SHIRTS

Guaranteed to all pre-entries received by May 8 and as available on race day.

AWARDS

Prizes will be awarded to: top overall male and female winners.

First-place male and female winner in the following age categories: 12 and under, 13-18, 19-29, 30-39, 40-49, 50-59, 60-69, 70+.

Raffle prizes awarded to registered runners following the race.

COURSE

Flat and fast through Slater Memorial Park. Measured by Ray Nelson.

RESTRICTIONS

For your safety and the safety of others, USA Track & Field Association prohibits the use of baby joggers, strollers, headsets, or the presence of pets in road races. Athletes who do not comply subject themselves to disqualification.

Baby joggers and strollers are allowed only in the 2-mile walk.

DIRECTIONS

Route 95 – Take Exit 2/Newport Avenue (in Massachusetts). Follow Newport Avenue 1.4 miles. The entrance to Slater Memorial Park is on the left. Follow signs to Daggett Farm within the park.

QUESTIONS or to VOLUNTEER

Contact the Women & Infants Development Foundation at (401) 274-1122, ext. 2021 or khall@wihri.org.



STEPPING OUT OF THE DARKNESS
5K Run and 2-Mile Walk
Slater Memorial Park, Pawtucket, RI
Saturday, May 10, 2008

Name _____

Address _____

City _____

State _____ Zip _____

Phone _____

E-mail _____

Age _____ Sex _____

Check One: ____ 5K Run ____ 2-Mile Walk

____ \$18 Mail/Online by May 8, 2008

____ \$20 In Person on Race Day

____ I have enclosed an additional tax-deductible contribution of \$ _____ for the Women & Infants Day Program

Make Checks Payable to:
Women & Infants Development Foundation

Mail Registration Form and Payment to:
Women & Infants Development Foundation
101 Dudley Street
Providence, RI 02905
Attn: Day Program 5K

WAIVER:

I agree to assume all responsibility for any and all risk, damage or injury that may occur to me as a participant in this event. I and my heirs, executors and administrators release and discharge USATF, City of Pawtucket, Slater Memorial Park, Women & Infants Hospital, Women & Infants Day Program, and their Boards of Directors or Trustees, employees, and volunteers; race directors and race committee, and all sponsors, and/or all persons associated herewith, from all damages or rights of action, present or future, whether the same be known or unknown, anticipated or unanticipated, resulting from or arising out of, or incident to my participation in this event. I agree to permit the free use of my name and or picture in any broadcast, telecast, or other account of the race and walk.

Signature (parent/guardian if participant is under 18).

PLEDGES

Yes, I/We want to support the Women & Infants Hospital Day Program for the treatment of Postpartum Depression

Walker/Runner Name:

Pledges:

Name	Amount
1. _____	
2. _____	
3. _____	
4. _____	
5. _____	
6. _____	
7. _____	
8. _____	
9. _____	
10. _____	

Total Pledges \$ _____

Checks should be made payable to the Women & Infants Development Foundation.

Donations may also be made through the online registration at www.needtorace.com or www.givetowomenandinfants.org.



Women & Infants'

Women & Infants Hospital, a teaching hospital of The Warren Alpert Medical School of Brown University, is committed to improving the health and well being of women and infants, and to providing our essential services regardless of ability to pay.

Women & Infants Hospital is a nonprofit, 501(c)(3) organization: tax ID#05-0258935.

Donations to Women & Infants Hospital are tax deductible to the fullest extent possible by law.

Women & Infants Hospital
101 Dudley Street
Providence, RI 02905

www.womenandinfants.org



STEPPING OUT OF THE DARKNESS

**First Annual
5K Run and 2-Mile Walk**

**Saturday, May 10, 2008
9:00 am**

**Slater Memorial Park
Pawtucket, RI**

Proceeds to benefit the Women & Infants Hospital Day Program for the treatment of Postpartum Depression

