

Labor of Love Walker Registration



Complete this form and return it to CCC at the address listed below.
Or email the form to Alison.Hammond@cccofva.org.
Call Alison at 540.278.1637 with questions.

Name: _____

Address: _____

Address 2: _____

City state zip: _____

Email address: _____

Number of walkers on Monday, Sept. 5: (choose from dropdown menu)

Adult(s) _____ x \$10 per adult = \$_____

Child(ren) _____ x \$5 per child = \$_____

Total = \$_____

Payment made online at www.cccofva.org

Check mailed to: Commonwealth Catholic Charities
Attn: Labor of Love
541 Luck Avenue, SW
Suite 118
Roanoke, VA 24016

T-shirt size: (choose size and number of items from dropdown menu)

Adult _____ + _____ Adult _____ + _____

Child _____ + _____ Child _____ + _____