



18th LifeWorks Guam



"Out of the Darkness, Our Community Walks, Candlelight Memorial Service

P.O.Box 22635, Barrigada, Guam 96921, Phone# 671-685-0237, rainbows@yahoo.com

CREATE HOPE THROUGH ACTION!

In observance of September Suicide Awareness Month 2022. Beneficiary: Rainbows for All Children-Guam. Ribbons and memory candles will be given to participants while supply last.

Processional Walk Go: 5:45 am ENDS: 7:00am
Refreshments, Memory tree:7:00 am – 7:30 am:

Candlelight Memorial Service: 7:30 am-8:30 am
Location: St. Anthony Catholic School Gym
Music, Songs, Readings:
Father Paul Goffigan, Father Jeff San Nicolas
Pastor Robert Paulino, Songs: Eiscele Paulino

Suicide Survivor Participation and Sharing.
Participants encouraged to bring photos and memento of their loved ones lost by self-harm.

Place: St. Anthony Catholic School Gym
Date: September 24, 2022, Saturday
Pre-register at St. Anthony Catholic School:649-4871,
Goody's Sporting Goods:671-646-4800
Fee: \$5.00, \$20.00(5) Mon.-Fri. 8:00am to 5:00 pm
Deadline SACS: 9/23/2022:6:00 pm Friday
Goody's: Monday-Sunday: 10:00 am-7:00 pm
Pre-registration: \$5.00, \$20.00 for 5
GPO: Sat. (9/17), Sun. (9/18): 1:00pm-5:00pm
Registration on the day of event: 5:00 am-5:30 am
Fee on event day: \$6.00 (1), \$25.00(5)

Information contact:
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Roxanne Aguon: 671-483-7574, Tricia Tenorio:671-688-6422

Thank You to all our sponsors:
Major, Platinum, Gold, Silver and Bronze

Please make check (non-refundable) payable to
RAINBOWS FOR ALL CHILDREN-GUAM

Raffle Prizes and surprises await you.

Name: _____

Address: _____

Telephone: (w) _____ (h) _____ email address _____

Paid by: Cash _____ Check _____ Received by: _____

WAIVER: The following release must be signed by each participant, or if participant is under 18 yrs. of age, must be signed by the parent/guardian of the entrant. I assume all risks associated with this event, including but not limited to falls and contact with other participants. Having read this waiver and knowing these facts & consideration of our accepting my entry, I for myself and anyone entitled to act on my behalf, waive and release, The Guam Daily Post, KUAM Careforce, GPO, St. Anthony Catholic School, Dr. D. Chiropractic and Nutrition Service, Rainbows for All Children Guam, and Life Works Guam and all other sponsors and their representatives and successors from all claims and/or liabilities of any kind arising out of my participation in this event. I also grant permission to all of the foregoing to use any photograph, recording or any other record of this event for any legitimate purpose. Signature: _____ Date: _____ Signature of parent/guardian if entrant under 18 years old.

NAME: _____ (please print) Receipt: I verify _____ paid a non-refundable registration fee for this event. Received by: _____ Cash _____ Check _____

Saving Lives Begins With YOU! Thank you for your support!

