



100 mile Jim SWIM

October 22 — 6:30-8:00 pm

October 23 — 11:30-2:30 pm

Fundraiser to raise awareness for Pick's
Disease and to help support our Team





Pick's disease is a relatively rare form of dementia that causes a slow shrinking of brain cells due to excess protein build-up. Patients with Pick's initially exhibit marked personality and behavioral changes, and then a decline in the ability to speak coherently.

While up to seven million Americans may be afflicted with dementia, Pick's disease accounts for just five percent of all progressive dementias. Because of the manner in which symptoms first appear, it is frequently misdiagnosed in the early stages as depression, mental illness, or Alzheimer's disease—but Pick's has its own set of characteristics that set it apart. And although there is no cure, learning about the unique symptoms can help you more quickly identify and manage the disease

What is Pick's disease?

According to Arnold Pick, who first described the disease in 1892, Pick's disease causes an irreversible decline in a person's functioning over a period of years. Although it is commonly confused with the much more prevalent Alzheimer's disease, Pick's disease is a rare disorder that causes the frontal and temporal lobes of the brain, which control speech and personality, to slowly atrophy. It is therefore classified as a frontotemporal dementia, or FTD.

Pick's disease usually strikes adults between the ages of 40 and 60, and is slightly more common in women than in men. Unfortunately, the cause for Pick's disease is unknown. A few studies suggest that Pick's disease may have a genetic component, but most family members are unaffected. Other risk factors are unknown.

The "100 Mile Jim Swim" is a fund raiser in which participants earn money for our team and the "Jim and Jayne Buchanan Pick's Disease Foundation" by swimming lengths of the pool. Swimmers have a one-hour period to swim a maximum of 100 lengths. Participants get pledges from businesses, family, neighbors, etc. prior to swimming.

The exciting benefits of this program are that The "100 Mile Jim Swim" is not only an excellent fund raiser, but also an opportunity to combine swimming and a social event. Additionally, The "100 Mile Jim Swim" can boost team spirit and increase community awareness of our team.

Each participant should have a goal to raise at least \$50.00; all checks should be made payable to Lone Star Aquatic Club (That way all donations will be considered **100% TAX DEDUCTIBLE**). We need everyone to participate so we can reach our goal!

In order to participate, please complete all the information in this package and sign the waiver. Return with donations by October 21st. 2010.

We need parents volunteers, please sign up with Malena Davidson (malena-davidson@sbcglobal.net)

If you work for (or own) a company that can "match" the funds raised by an athlete in this fund raiser or just want to donate money to our projects (which will be **100% TAX DEDUCTIBLE**) you can be recognized as an Official Sponsor in our newsletter and website. Please contact our Head Coach —Adam Depmore - LSACCOACH@hotmail.com— as soon as possible. Also, please pass the information along to anyone else you think may be able to help us out.

Thanks for your support of the "Lone Star Aquatic Club"

LIABILITY RELEASE

I, _____, intending to be legally bound, understand and agree that I am voluntarily participating in the "100 Mile Jim Swim" at my own request and at my own risk. I acknowledge that I am aware of all the risks inherent in the event and certify that I am physically fit, have not been otherwise informed by any physician and know of any restrictions imposed on me by my own physician that would in any way prevent me from actively participating in the event.

In consideration of being permitted to participate in this Event, I, on behalf of myself, my successors in interest heirs, assigns and representatives, hereby fully release and agree to hold harmless LONE STAR AQUATIC CLUB and representatives, successors and entities (be they individuals or organizations, singly and collectively, together with their insurers, of and from any and all liability, claims, damages or causes if action for any following, bodily injury, property damage or any other loss or inconvenience whatsoever, suffered by me at any time hereafter occurring as a result of my voluntary participation in the Event Liabilities). I also give permission for the free use of my name, picture and voice in any broadcast, telecast, print account or any other account in any medium of the Event.

Signature _____ Date _____

Must be signed by parents or legal guardian if participant is under age 18 on the date this release is signed.

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Dear _____:

My swim team, Lone Star Aquatic Club, has just started a new project—**100 Mile Jim Swim**—to help raise money for our team and people diagnosed with **Pick's disease**. I could really use your help. Jim Buchanan, the person we are naming this event after, has been a generous sponsor of our team over the years and suffers from this disease. There is no cure and the disease has really taken over his body. As a whole, the team plans on swimming 100 miles to raise awareness for this disease and to help support our team.

My goal is to be the top fundraiser in our club, so I'm working very hard to collect as many pledges as I can. I was hoping that you could make a pledge to help me reach my goal.

The money we make goes directly to our club and to "**The Jim and Jayne Buchanan Pick's Disease Foundation**", which works to find a cure for Pick's disease.

If you want to make a pledge you can send me a check made out to **Lone Star Aquatic Club**. Our team will devote 25% of all proceeds to the fight against Pick's disease.

As I said, I'm getting pretty good at this swimming stuff, so my goal is to swim 100 lengths of the pool within the 1 hour time limit. That's almost 3 miles all by myself! With the help of my teammates I'm sure we can reach the 100 mile goal with no problem.

If you would like to sponsor me, please let me know, and if you have any friends that might want to help out, I can always use their support also.

Thanks so much.

Love,



LONE STAR
aquatic club



Sponsor Form

Please complete form and return to the Treasurers Folder. Please print clearly.

Name of Swimmer: _____ Age: _____ Phone No. _____

Address: _____

Sponsor's Name	Sponsor's Phone No.	Amount of Donation	Paid
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			

Please make checks payable to: Lone Star Aquatic Club

Office Use Only

Initial Verification of Participation _____ Total \$ Raised _____



LONE STAR
aquatic club