Walk for Heart

PLEDGE FORM

Participant information must be completed fully in a legible manner in order for you to receive your fundraising prize. Tax receipts will automatically be issued for donations over $20. **Do not include your sponsors who donated online.**

HEART & STROKE FOUNDATION OF QUÉBEC

Finding answers. For life.

Last name: _____ First name: _____

Address: _____ Apt #: _____

City/Town: _____ Postal Code: _____

Age: ○ 15 yrs. and under ○ 16 - 24 yrs. ○ 25 - 34 yrs. ○ 35 - 44 yrs. ○ 45 - 54 yrs. ○ 55 + yrs.

Email: _____ Sex : ○ F ○ M

Home Telephone: _____ Business Telephone: _____ Ext. _____

Lace up as a team

Any 5 participants can make up a team. It could be family members, friends, neighbours, co-workers or any combination you like.
Register your team and get a banner to customize and carry with pride on the big day! Raise $1,500 or more and enter a draw to win a team prize.

Team Name (if applicable): _____ Team Captain Name: _____

Sponsor's Name (Please print clearly)	Address (Please Print Clearly)	City/Town	Postal Code	Pledged	Submitted

Pledge submission information

All pledges are to be submitted on or before Event Day.
Pledges may be submitted by cash, cheque or by putting the total pledges collected (excluding online) on credit card. These options can be processed by your local area office. **DO NOT** send cash in the mail.

Subtotal this page only		Page
Total Pledges - All pages		
Total Pledges raised ONLINE		of
GRAND Fundraising Total		

Photocopy as required for additional sponsors.

2008 WALK FOR HEART WAIVER AGREEMENT Please Read Carefully Release Waiver and Indemnity: The Walk for Heart.

I Agree: 1) That at all times during the Walk for Heart my safety remains my sole responsibility and 2) that I will discontinue walking in Walk for Heart if requested to do so by any of the sponsors or their representatives and 3) that I am aware of the inherent risks in participating in Walk for Heart and assume such risks. IN CONSIDERATION of the acceptance of my application and permission to participate as an entrant in Walk for Heart post-event activities, I for myself, my heirs, administrators, successors and assigns HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE the Heart and Stroke Foundation of Québec and all their associations and sponsoring companies and all their respective agents, officials, officers, directors, employees, servants, conductors, representatives, successors and assigns OF AND FORM ALL claims, demands, payments, actions, causes of action, damages, costs and expenses, in respect to death, injury, loss or damage to my person or property HOWSOEVER CAUSED arising or to arise by reason of my participation in the said event AND NOTWITHSTANDING that same may have been contributed by the negligence of any of the foresaid. I FURTHER UNDERTAKE TO HOLD AND SAVE HARMLESS and AGREE TO INDEMNIFY all of aforesaid from and against any and all liability incurred by any or all of them arising as a result or in any way connected to my participation in the said event. BY SUBMITTING THIS ENTRY I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREED to the above AGREEMENT, RELEASE, WAIVER, AND INDEMNITY. I WARRANT that I am physically able to participate in the Walk for Heart and 4) by participating in the Walk for Heart, I consent to the use of my photograph, without compensation, in any future publicity carried out by the Heart and Stroke Foundation of Québec.

PRINT FULL NAME OF PARTICIPANT

SIGNATURE X (PARENT/GUARDIAN SIGNATURE IF UNDER 18)

We are committed to protecting the privacy of your personal information. We may maintain a record of your interaction for donor-related promotion and tax receipting purposes, where required. Occasionally, we may contact you with mission-related communications. If you wish no further contact or have any questions or concerns regarding the privacy of your personal information, please contact the Chief Privacy Officer of the Heart and Stroke Foundation of Québec at 1-888-HSF-INFO or through www.heartandstroke.ca/privacy.