

REGISTER TODAY.

One person per registration form.
Please print clearly, and complete
both sides of form as applicable.



BC Cancer Foundation

1. General information

First Name: _____ Initial: _____ Last Name: _____

Address: _____ City: _____ Province: _____ Postal Code: _____

Email Address: _____ Home Phone: _____
Please include your email address so we can send you important Weekend updates

Employer Name: _____ Other Phone: _____
 Cell/Mobile Business

Date of Birth: _____ Gender: Female Male
Must be at least 16 years of age at time of event

How did you hear about The Weekend to End Breast Cancer™?

Radio Station: _____ TV Channel: _____

Newspaper/Publication: _____

Friend or Relative Previous Participant

How else did you hear about The Weekend to End Breast Cancer?

T-shirt size:

- Small
 Medium
 Large
 Extra Large
 XX Large

Are you a breast cancer survivor?

Y N

Do you require vegetarian meals while on the event?

Y N

2. Team information

Create a New Team/Join an Existing Team

What is your team name? _____

Are you: Creating a New Team Joining an Existing Team

Are you joining as a: Team Member Team Captain

Register as an Individual

You can also sign up as an individual Walker or Crew Member. At any time after registering, you can join an existing team or start a new one.

3. I am registering as a:

Walker Registered Walkers commit to raising \$2,000 for The Weekend to End Breast Cancer benefiting the BC Cancer Foundation to participate in the 60 kilometre walk on August 17–19th, 2007.

Crew Member Crew Members must attend the entire event in a service capacity and they do not walk the 60 km route. Crew Members are not required to fundraise, but they are strongly encouraged to raise a minimum of \$500 so that more money remains with the BC Cancer Foundation.

What is your individual fundraising goal? (Suggested goal: \$3,200) _____

4. Registration fee

Please submit your non-refundable, non-transferable \$75 registration fee with your registration form. This fee does not apply toward your fundraising commitment and is not tax deductible. Please do not send cash.

Method of payment: Cheque made payable to The Weekend to End Breast Cancer

Visa Mastercard Card Number: _____ Exp. Date: _____

Signature: _____

Would you like to make an additional gift along with your registration fee? Additional donation: _____

More important information is on the back! Please turn over and complete the other side. ▶

5. Waiver and Release of Liability (Please read and sign below.)

I wish to participate in The Weekend to End Breast Cancer™ benefiting the BC Cancer Foundation, a 60 kilometre walk, scheduled to take place in Vancouver on August 17–19th, 2007 and I agree to abide by the rules, regulations, and event instructions of the event, as well as all applicable municipal and provincial laws and regulations.

I understand that participating in such an event, using public streets and facilities and the use of and participation in services made available to participants during the event (including massage, chiropractic, and medical services), is a potentially hazardous activity and can result in serious injury or death. I am aware of and expressly assume all risks associated with participating in this event, including, without limitation, falls, contact with other participants and objects, the effects of weather, traffic, and the conditions of the streets and route used by the event and assert that my participation in this event is voluntary.

In consideration for being permitted to participate in this event, I, for myself and for anyone entitled to act on my behalf, hereby waive and release from any and all claims for injuries and damages I may have arising out of the event or my participation in the event (including without limitation any pre- and post-event activities), against The Weekend to End Breast Cancer, CauseForce, Inc.™, CauseWorks, Inc.™, the BC Cancer Foundation and BC Cancer Agency, the City of Vancouver, the Province of British Columbia, Canada, any beneficiaries, sponsors, officials, participating clubs, communities, organizations, friends of the event, Walkers, participants, third-party vendors, government or public entities (including, without limitation, the Department of Transportation), and their respective affiliates, successors, officers, directors, employees, volunteers, agents and representatives, including, without limitation, the event medical sponsor, the medical director, and members of the medical team.

I intend by this Waiver and Release to release, in advance, and to waive my rights and to discharge all of the persons and entities mentioned above, from all claims for damages for death, personal injury or property damage that I may have, or which may hereafter accrue to me, as a result of my participation in this event, even though that liability may arise from negligence, carelessness, or recklessness (whether simple or gross) on the part of the persons or entities being released, from dangerous or defective property or equipment owned, maintained or controlled by them or because of their possible liability without fault. I understand and agree that this Waiver and Release is binding on my heirs, assigns, and legal representatives.

I attest that I am physically capable of, and have sufficiently trained for, completing this event. If I am aware of or under treatment for any physical infirmity, ailment, or illness, my medical care provider has been apprised of, and has approved of, my participation in this event. I acknowledge that I, and I alone, am solely responsible for my personal health and safety, and the personal property I bring with me. I consent to receive medical treatment which may be advisable in the event of illness or injuries suffered by me during this event, and I agree to pay for the costs of any such medical treatment.

I agree that my participation in the event is subject to the sole discretion of the organizers of the event, and that my participation may be limited or terminated, with or without cause.

I represent and warrant that I will be at least 16 years old at the time of the event. If I am under the age of 18 I understand I MUST have a guardian accompany me on the event as a fellow registered participant.

I understand that all donations processed by The Weekend to End Breast Cancer donation office are non-refundable and non-transferable, even if I do not participate in the event. I further understand that my \$75 registration fee is non-refundable, non-transferable, does not apply toward my fundraising commitment, and is not tax deductible.

If I am a Walker, I understand that I must raise at least \$2,000 in order to walk in the event. If I have not raised at least \$2,000 before August 17th, 2007, I may make my own donation to reach that minimum in order to walk.

I understand that The Weekend to End Breast Cancer, and all its related events, are public events which may be recorded and so I give permission for the free use of my personal information including name, voice or likeness observed at these public events, in any broadcast, telecast, advertising promotion or other account of this event for marketing or promotion for future or similar events.

THIS WAIVER AND RELEASE SHALL BE INTERPRETED AND THE RIGHTS OF THE PARTIES DETERMINED UNDER THE LAWS OF THE PROVINCE OF BRITISH COLUMBIA. THE BRITISH COLUMBIA COURTS SHALL HAVE EXCLUSIVE JURISDICTION FOR ANY DISPUTE ARISING UNDER, OR PERTAINING TO, THIS WAIVER AND RELEASE.

I have carefully read this Waiver and Release and fully understand its contents. I am aware that this is a release of liability and a binding contract between myself and the persons and entities mentioned above and I sign it of my own free will. I understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing this Waiver and Release freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Signature of participant (or guardian if participant is under 18)

Date

6. Meet your fellow participants

Are you willing to share your contact information with fellow participants? Y___ N___. If you mark “yes,” your information will only be shared with other registrants of The Weekend to End Breast Cancer for the purpose of Training Walks, invitations, and other official event reasons. Your contact information will not be used for any other reasons. Please visit www.endcancer.ca for our complete Privacy Policy.

7. Your Privacy

The BC Cancer Foundation respects your privacy and adheres to legislated privacy requirements. The personal information we collect about you from The Weekend to End Breast Cancer benefiting the BC Cancer Foundation may be used to deliver BC Cancer Foundation programs and services and to periodically inform you of funding needs, opportunities to volunteer or donate, special events, lotteries and surveys. On occasion we publicly recognize the names of donors.

If we do not hear from you before our next contact we will take this as consent to collect and use your personal information for these purposes. If at any time you do not consent to having your personal information used for the purposes set out above please contact us at (604) 684-WALK (9255) or email vancouvercoaches@endcancer.ca.

We have not, nor will we ever, sell, trade or rent-out any names or personal information.

8. Please send completed form and registration fee directly to:

The Weekend to End Breast Cancer
303 - 698 Seymour Street | Vancouver, BC V6B 3K6

Or register online at www.endcancer.ca
Questions? Call (604) 684-WALK (9255)



BC Cancer Foundation
Supporting research & care at BC Cancer Agency

Please note that The Weekend to End Breast Cancer, the BC Cancer Foundation, and CauseForce, Inc. (CauseWorks, Inc.) cannot make any guarantees about what percentage of a donation will remain for the cause and what percentage will help cover the expenses of the event. This depends entirely on how many people participate and on how much money they raise. The more we raise, the greater the percentage that will remain for the cause. Please inform your donors of this fact.