



# 2020 REGISTRATION FORM

Complete this registration form and sign the waiver. Once you have collected all your pledges, please take all pledges and pledge forms to a PAA representative, you may mail cheques with completed forms to **Parkinson Association of Alberta Head Office #120, 6835 Railway St. SE, Calgary, AB T2H 2V6, PLEASE DO NOT MAIL CASH.**

## PARTICIPANT REGISTRATION FORM

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cellular Phone: \_\_\_\_\_

**I would like my donations to be raised for (region):** \_\_\_\_\_

**I wish to receive email updates from Parkinson Association of Alberta**

## WAIVER

In signing this release I acknowledge that I understand the intent thereof, and I hereby agree to absolve and hold harmless Parkinson Association of Alberta (PAA), the corporate sponsors of the event and any other parties connected in any other way with this event in any way, singly, or collectively, from and against blame and liability for any injury, misadventure, harm, loss, inconvenience or damage hereby suffered or sustained as a result of participation in the "Parkinson Step 'n Stride", or any activities associated therewith. I also give full permission for use of my name, photo and video in connection with this event.

Signature of participant or guardian *(If under 18 years of age)*:

\_\_\_\_\_ Date: \_\_\_\_\_

## PLEASE ENSURE TO:

- » **Fill out the form completely and print clearly; accurate mailing addresses must be included to receive charitable tax receipt**
- » **Tax receipt for pledges of \$20 or more**
- » **Make cheques payable to "Parkinson Association of Alberta"**
- » **Donations can be made by two methods: Cheque or E-transfer to PAA Accounting email; [accounting@parkinsonassociation.ca](mailto:accounting@parkinsonassociation.ca)**
- » **\*For E-Transfer please include the name and city of the walker, in the memo field being pledged**

PLEDGE

NAME JOHN SMITH	ADDRESS 120 - 6835 RAILWAY ST SE				<input checked="" type="checkbox"/> EFT/CASH	<input type="checkbox"/> CHEQUE
	TELEPHONE 403-243-9901	CITY CALGARY	PROV AB	POSTAL CODE T2H 2V6	\$ 50	\$ 100
NAME	ADDRESS				\$	\$
	TELEPHONE	CITY	PROV	POSTAL CODE		
NAME	ADDRESS				\$	\$
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NAME	ADDRESS				\$	\$
	TELEPHONE	CITY	PROV	POSTAL CODE		
Copy this page if you need more space, or download one at: <a href="http://www.stepnstride.ca">www.stepnstride.ca</a>					TOTAL *EFT	TOTAL CHEQUE
					\$	\$
<b>GRAND TOTAL OF CASH, EFT &amp; CHEQUES</b>					\$	

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\*If EFT is the preferred method of donating,  
please use the email [accounting@parkinsonassociation.ca](mailto:accounting@parkinsonassociation.ca)