



Strides for Change 2024 Pledge Sheet

First Name: _____ Last Name: _____ Phone: _____
 Home Address: _____ City: _____ Prov: _____
 Postal Code: _____ Email: _____

Donor's Name	Home Address, City, Province, Postal Code	Amount	Date Paid	Tax Receipt			
				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
1.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
2.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
3.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
4.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
5.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
6.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
7.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
8.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
9.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
10.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

Total Pledged \$ _____ Total Collected \$ _____

Please make cheques payable to MADD Cape Breton. Please collect all contributions in advance and, if applicable, turn them into your Team Captain.

Sunday, June 2, 2024. Walks goes from 11 am - 1 pm. See you there!

Please contact Strides for Change at 1-800-665-6233 ext. 350 or email maddcapebreton@outlook.com ASAP to sign up!

STRIDES FOR CHANGE RELEASE AND INDEMNIFICATION

The Strides for Change walk involves walking – an activity which may include risks such as, but not limited to, falls, interaction with other participants, effects of weather, traffic, and conditions of the road. In consideration of being allowed to participate in this event, I hereby expressly assume all risks, including personal injury and death, arising in any way out of my participation in the Strides for Change or any related activities. It is my responsibility to dress appropriately. Although route maps, rest stops, refreshments and other facilities made be made available during this event, I am solely responsible for my own health and safety. I represent and warrant that I am physically fit and able to participate in this event and I agree to stop and request assistance if I experience any symptoms such as, but not limited to, shortness of breath, pain or any other conditions which would make it difficult or unsafe to continue. I agree, for myself, my heirs, executors and administrators, to not sue and to release, indemnify and to hold harmless, MADD Canada, it's affiliates, officers, directors, volunteers and employees, and all sponsoring businesses and organizations and their agents and employees, from any and all liability, claims, demands, and causes of action whatsoever, arising out of my participation in this event and related activities – whether it results from the negligence of any of the above or from any other cause. This release and indemnification agreement shall be as broad and inclusive as is permitted by the province in which the event is conducted. If any portion of it is held invalid, the balance shall continue in full force and effect. I have read, understand and agree to the terms of this Agreement. If Participant is a minor, the parent or guardian must agree to the below: I am the legal guardian of Participant, and I hereby consent to his/her participation. In the event that I bring my pet to Strides for Change, I agree to indemnify, defend and hold MADD Canada, its employees, volunteers, participants, and others in attendance at the Strides for Change event harmless from any damages, injuries, liability, suits, fees, and expenses associated with any actions of my pet. I have read the foregoing release and indemnification agreement, and I hereby agree on behalf of myself and Participant to its terms.

Participant's Printed Name

Participant's Signature

Date

If Participant is a minor, parent or guardian must sign below. I am the legal guardian of Participant, and I hereby consent to his/her participation. I have read the foregoing release and indemnification agreement, and I hereby agree on behalf of myself and Participant to its terms.

Parent/Guardian's Printed Name

Parent/Guardian's Signature

Date

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11.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
12.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
13.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
14.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
15.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
16.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
17.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
18.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
19.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
20.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
21.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
22.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
23.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
24.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
25.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
26.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
27.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
28.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
29.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
30.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
31.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
32.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
33.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
34.				<input type="checkbox"/>	Yes	<input type="checkbox"/>	No