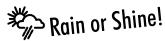
SPONSORS

A-T Walk for a Cure





Bring your donations to the event!

 WAIVER: In consideration of being permitted to participate in this event, I hereby for myself, my heirs, and personal representatives assume any and all risks which might

I am participating to help find a cure for ataxia-telangiectasia (A-T) \sim a rare genetic disease that attacks children like Alex, and in memory of Randy Van Hierden who lost his battle with A-T. A-T is like having cystic fibrosis, cerebral palsy, immune deficiencies, muscular dystrophy, and cancer all rolled into one genetic disease. Please help me in the race for a cure by sponsoring me. Make cheques payable to A-T Children's Project.

Company or Team Address		be associated with the event. I further waive, release, discharge, and covenant not to sue the A-T Children's Project, its officers, employees, sponsors, organizers, volunteers, or other representatives, or their successors and assigns, for any and all injuries or damages of any kind whatsoever suffered as a result of taking part in the event and/or any related activities. I also agree to the use of any photo, film, or videotape of the event for any purpose.			
City	ProvPC	Signature	Signature		
	Email	(Parent S signature ii participant is under 16)			
Name	Street Address or PO Box	City	Prov/POSTAL CODE	Cash	Cheque
		TOTAL 1	THIS PAGE	\$	\$

Age

DONOR TAX RECEIPTS: Fill out the form COMPLETELY & LEGIBLY in the name of the ADULT to receive a receipt for a cash gift, and gifts paid by check will receive receipts. The A-T Children's Project issues a tax receipt for donations of \$20 or more or as requested.

