## Waiver

**Pledge Form** 

In consideration of the acceptance of this entry in the HSC Foundation GD6 5km Run/Walk, I, for myself, my heirs, executors, administrators and assigns, waive any claims to which I may become entitled for injury or damage and release the organizers, sponsors, representatives, their agents and employees and any other person or organization assisting in this event, including the City of Winnipeg, the Province of Manitoba, and their employees and agents, Health Sciences Foundation, their employees and Board Members, and other participants and volunteers in the HSC Foundation GD6km Run/Walk, from any claims for damages or injury suffered by me as a result of my participation in this event. I further state that I am in proper physical condition to participate in the event and I am aware that road running is a potentially dangerous activity and am aware that participation could, in some circumstances, result in physical injury. I give my permission for the free use of my name and picture in broadcast, telecast or written account or this event.

Signature: (Parent/Guardian if under 18 years of age)

- Please make cheques payable to: HSC Foundation GD6 5km Run/Walk Send payment with pledge to MS107 – 820 Sherbrook St, Winnipeg, MB R3A 1R9 Or bring to the registration site on Wednesday, June 3 6:00 PM
- Additional pledge forms from <a href="mailto:gd6projecthope@alitra.com">gd6projecthope@alitra.com</a>
- Tax receipts issued by HSC Foundation for donations \$20 or greater

Sponsor Full Name	Address	City/Prov/Postal Code	Pledge Amount	Cash/ cheque



Thank you. Your efforts are greatly appreciated and will help to support Project Hope at GD6 Health Sciences Centre Foundation.

Charity Registration # 11895 5012 RR0001

I do not wish to receive future communications from HSC Foundation