

# Advokate Life & Education Services Annual

SATURDAY JUNE 18, 2022



AT LHEIDLI T'ENNEH  
MEMORIAL PARK

(Pavillion/playground) OR virtually from  
wherever you are! Rain or shine!

**Purpose:** To walk/run in solidarity with hundreds across the province to support vulnerable women and children in your community.

**Walker/Runner Information:** Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

**Student:** yes / no **School Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Parent/Guardian Name(s):** \_\_\_\_\_

## Instructions to Participants who want to use this form:

1. Get the word out! Start sharing on social media, call or email your friends and family to ask them to sponsor you as you walk/run 5k or 10k.
2. PARTICIPATION IS FREE To receive a tax receipt, fill out the pledge portion of this form with full names (no initials), full address, and donated amount. All cheques should be made payable to Advokate.
3. Return the **PLEDGE FORM** and money by **JUNE 30** as follows: Hope For Women 112-1600 15th Ave., Prince George

## YOU CAN FUNDRAISE ONLINE AT WALKFORLIFE.CA

Visit [walkforlife.ca](http://walkforlife.ca) to create your own fundraising page. Friends and family can sponsor you by making a tax receiptable donation right on your individualized page.

**PLEDGE FORM: Please print clearly. All donations of \$10.00 and over are receiptable.**

Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$	<input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:	
Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$	<input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:	
Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$	<input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:	
Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$	<input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:	
Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$	<input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:	

MORE PLEDGES ON OTHER SIDE (more pledge forms available at our office or download at [walkforlife.ca](http://walkforlife.ca))

**Contact us at [info@advokate.ca](mailto:info@advokate.ca) to receive a free Walk for Life T-Shirt!**

Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$ <input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:
Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$ <input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:
Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$ <input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:
Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$ <input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:
Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$ <input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:
Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$ <input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:
Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$ <input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:
Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$ <input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:
Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$ <input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:
Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$ <input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:
Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$ <input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:
Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$ <input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:
Full Name:	Phone #:	Paid? <input type="checkbox"/> Yes	Pledge: \$ <input type="checkbox"/> Chq / <input type="checkbox"/> Cash
Address:	City:	Province:	Postal Code:



Thank you for bringing HOPE to  
vulnerable women & families.

#WalkForLifeBC2022