Adve	okate Life & Education Services	PART
	5th Annual Walk For Life	NAME:
walkforlife		ADDRESS:

Saturday, June 1, 2024 VIRTUAL - Walk/run wherever you are!

Register & Fundraise Online at walkforlife.ca



Scan QR Code to donate online!

Advokate will issue charitable tax receipts for all donations \$10 or more.

PARTICIPANT INFORMATION

CITY: _____ POSTAL CODE: _____

EMAIL: PHONE NUMBER:

STUDENT INFORMATION (if applicable)

Want a chance to win one of the top student prizes? Students must register separately from their families!

SCHOOL:

GRADE:___

PARENT/GAURDIAN NAME:

Please print clearly.

Phone #:	Paid? 🗆 Yes	Pledge: \$	□ Chq / □ Cash
City:	Province:	Postal Code:	
Phone #:	Paid? 🗆 Yes	Pledge: \$	\Box Chq / \Box Cash
City:	Province:	Postal Code:	
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City:	Province:	Postal Code:	
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IMPORTANT INFORMATION

- ALL participants must register as a walker, even if you aren't fundraising online. You can register online at walkforlife.ca, email info@advokate.ca or call us at 604-852-4623 x26.
- All cheques should be made payable to Advokate.
- Email info@advokate.ca to receive a free walk for life shirt for fundraisers only.
- Need more pledge forms? Visit walkforlife.ca to download or visit Hope For Women for in person pick up.
- We walk rain or shine! Come in weather appropriate clothing.
- Please return the pledge form with donations by June 14 to Hope For Women: 112 1600 15th Ave, Prince George, BC



Advokate Life & Education Services 5th Annual Walk For Life

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Full Name:	Phone #:	Paid? □ Yes	Pledge: \$	Cash
Address:	City:	Province:	Postal Code:	
Full Name:	Phone #:	Paid? 🗆 Yes	Pledge: \$	Cash
Address:	City:	Province:	Postal Code:	
Full Name:	Phone #:	Paid? 🗆 Yes	Pledge: \$	Cash
Address:	City:	Province:	Postal Code:	
Full Name:	Phone #:	Paid? 🗆 Yes	Pledge: \$	Cash
Address:	City:	Province:	Postal Code:	
Full Name:	Phone #:	Paid? 🗆 Yes	Pledge: \$	Cash
Address:	City:	Province:	Postal Code:	
Full Name:	Phone #:	Paid? 🗆 Yes	Pledge: \$	Cash
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Full Name:	Phone #:	Paid? 🗆 Yes	Pledge: \$	Cash
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Full Name:	Phone #:	Paid? 🗆 Yes	Pledge: \$	Cash
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Address:	City:	Province:	Postal Code:	
Full Name:	Phone #:	Paid? □ Yes	Pledge: \$ □ Chq / □	Cash
Address:	City:	Province:	Postal Code:	
Full Name:	Phone #:	Paid? 🗆 Yes	Pledge: \$	Cash
Address:	City:	Province:	Postal Code:	
Full Name:	Phone #:	Paid? 🗆 Yes	Pledge: \$ 🗆 Chq / 🗆	Cash
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Full Name:	Phone #:	Paid? □ Yes	Pledge: \$	Cash
Address:	City:	Province:	Postal Code:	



THANK YOU FOR PUTTING HOPE INTO ACTION!