

	Name:	Last Nam		
	Address:	Aŗ	op/Suite:	0 x- Ta1 11a0
	City:	Province:	Postal Code:	WalkForWildlife.ca
	Telephone:	Email:		
Walk Community:	Team Name:		Team Ca	ptain:
	,			tors and sponsors from any claims, injuries,

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Participant Waiver: I hereby release and discharge the Canadian Wildlife Federation and all other participating distributors and sponsors from any claims, injuries, losses or liabilities suffered or incurred as a result of my participation. Through my participation at this Canadian Wildlife Federation event, I acknowledge that my photograph may be taken and used in future promotional materials. If participant is under 18 years of age, parent or guardian must sign.

Privacy Statement: The information you have provided to us will be used to process your donation and to provide you with a tax receipt. From time to time, we may use your contact information to keep you informed of other activities, events and/or fundraising opportunities in support of the Federation.

☐ Continue to contact me about the Walk for Wildlife and other CWF initiatives, activities and updates.

PLEDGE INFORMATION

This Pledge Form is for tracking offline donations only. Please make cheques payable to The Canadian Wildlife Federation. Please print clearly. Tax receipts will be issued for donations of \$15.00 or more (full mailing address is required.)

I entered this pledge online	Sponsor Name	Mailing Address					Phone Number Email	Amount Pledged	Cash or Cheques Collected		
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	PLEASE AND	USE	PC	N	A						
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