

**PLEASE PRINT**



**Saturday September 26<sup>th</sup>**

**ALL MONEY RAISED WILL GO TO  
THE SAINT JOHN REGIONAL  
HOSPITAL FOUNDATION TOWARD  
THE CANCER TREATMENT CENTRE**

Name \_\_\_\_\_  
Address \_\_\_\_\_

**N.B. CHEQUES MUST BE PAYABLE TO THE FUNDY TRAIL CANCER WALK COMMITTEE  
ALSO: IN ORDER TO RECEIVE A RECEIPT WE MUST HAVE COMPLETE ADDRESS OF DONOR**

FULL NAME	FULL ADDRESS	PLEDGE AMOUNT	PAID <input checked="" type="checkbox"/>	RECEIPT NUMBER
	_____			
	_____			
	_____			
	_____			
	_____			
	_____			
	_____			

*I know that walking / hiking is a potentially hazardous activity. I should not enter and walk / hike unless I am medically able and properly trained. I agree to abide by any decision of an official to my ability to safely complete the walk / hike. I assume all risks with walking / hiking in this event including, but not limited to falls, contact with other participants, the effect of weather (including wind, rain and fog), traffic and the conditions of the path in consideration of you're accepting my entry. I for myself and anyone entitled to act on my behalf, waive and release the SAINT JOHN REGIONAL HOSPITAL FOUNDATION, THE FUNDY TRAIL CANCER WALK COMMITTEE, THE FUNDY TRAIL AND THE FUNDY TRAIL DEVELOPMENT AUTHORITY INC. from all claims or liabilities arising out of my participation in this event.*

\_\_\_\_\_  
*Signature (parent or guardian if under 18)*

\_\_\_\_\_  
*Print*

\_\_\_\_\_  
*Date*

Starting and ending at Big Salmon River on the Fundy Trail Parkway  
Registration starts @ 10:00am - Parking Lot 6 at Big Salmon River

**The Fundy Trail Cancer Walk Committee and the Saint John Regional Hospital  
Cancer Treatment Centre  
would like to thank you for your participation.**

For further information please contact: Betteanne 833-4589, Barb 833-4768, Nancy 833-4552,  
Susan 833-4336 or the Fundy Trail Office at 833-2019

**PLEASE JOIN US FOR-FUN-FOOD-FRIENDSHIP-ENTERTAINMENT AT  
THE TENT AFTER THE WALK**