



19th ANNUAL WING KEI WALKATHON

第19屆榮基百萬行

Saturday, June 22, 2019
2019年6月22日 (星期六)
8:30 AM - 2:00 PM

Calgary Chinese Cultural Centre
Registration
Sien Lok Park
Ceremony



Pledge Form 贊助表格 (Please print clearly 請用英文正楷清楚填寫)

Name (First & Last) 姓名 _____ Age 年齡 (Optional / 非必要填寫) _____

Address 地址 _____

City 城市 _____ Province 省份 _____ Postal Code 郵政編號 _____

Telephone 電話 _____ E-mail 電郵 _____

Does your organization has a **matching grant program**? 你所屬的機構有**相等捐贈計劃**嗎? Yes 有 No 沒有

Please keep me updated on Wing Kei news and fundraising events. 請通知我有關榮基最新消息及籌款活動

Please read the RULES & REGULATIONS below carefully and sign the declaration. 請詳閱以下規則及章程並簽署聲明

RULES & REGULATIONS

We will walk regardless rain or shine, so please come prepared. Pledges raised are for participation regardless of distance of the walk. Please collect all pledges before the day of event. All outstanding amount shall be handed to Wing Kei Care Center office before July 7, 2019. Tax receipt will be issued for donations of \$25 or more.

規則及章程

是次步行籌款活動將風雨不改，請作適當準備。贊助善款金額與路程長短無關。請盡量於步行前收集全部款項。未收集的款項請於 2019年7月7日前將全數交回榮基護理中心辦事處。捐款 25 元或以上者本會將發報稅收條。

DECLARATION

I, the undersigned, hereby agree/on behalf of my minor child agree that:

- (1) I acknowledge that participation in the 19th Wing Kei Annual Walkathon (hereafter referred to as "the Event") exposes me/my minor child (hereafter collectively referred to as "the Participants") to many risks, including some resulting from the negligence of the Organizer of the Event. In consideration of the Participants' participation in the Event, I voluntarily assume all such risks including personal injury and property damage on behalf of the Participants, and I do release, discharge and indemnify the Chinese Christian Wing Kei Nursing Home Association, Calgary Chinese Cultural Centre, Calgary Chinese Cultural Centre Association and their respective officers, directors, employees, volunteers, agents and sponsors (collectively referred to as "the Organizer") from all causes of actions, claims, damages and losses whatsoever which the Participants' estate may have on account of personal injury, property damage or accident of any kind related to the Participants' participation in the Event;
- (2) The Participants are physically fit to participate in the Event; I have read and understood the above; I am aware that I am waiving certain legal rights which the Participants may have; and I have been given the chance to seek independent legal advice; and
- (3) by participating in the Event, the Participants consent to be photographed, filmed and/or otherwise recorded in connection with, or as part of, journalistic, advertising, marketing, promotional, archival or security activities by the Organizer. The Participants' participation constitutes the Participants' consent to such photography, filming and/or recording and to any use, in any and all media, throughout the universe in perpetuity by the Organizer, without compensation to the Participants, of the Participants' appearance, voice and/or name for the above-noted purposes.

聲明 (以英文版本為準)

我本人/代表本人未成年子女，謹在此作以下聲明：

- (1) 本人/本人未成年子女(以下統稱為『參加者』)已考慮和願意承擔參與第 19 屆榮基百萬行(以下稱為『是次活動』)有可能帶來多方面的風險，包括或因主辦單位疏忽而引致的風險。本人謹在此聲明，若參加者因參與是次活動引致身體受傷或財物損失，參加者絕不向華人基督教榮基護理老會、卡城中華文化中心、卡城中華文化中心協會或任何有關人士、職員、義工、承辦商、機構、團體、部門、小組等(統稱為『主辦單位』)作任何法律訴訟，或索取任何賠償。
- (2) 參加者體格正常，有足夠體力參與是次活動。本人已詳閱及明白上文，並願意放棄法律賦予參加者有關的合法權利；本人亦已賦予機會尋求獨立法律意見。
- (3) 參加者同意主辦單位拍攝與是次活動有關的照片、錄像、及/或作與新聞、宣傳、營銷、推廣、存檔或保安有關的用途。參加者准許主辦單位把該照片、錄像及/或錄音在任何時候、地點、媒介作任何用途。主辦單位無需因參加者的樣貌、聲音及名字出現在以上提及的用途上而向參加者作出任何賠償。

SIGNATURE 簽名 _____ DATE 日期 _____/_____/_____

(Parent/Guardian signature required if under 18 years old) 十八歲以下之步行者請由家長/監護人簽名

TO PARTICIPATE:

- Fill in this pledge form
- Collect pledge money from sponsors
- Return this form and pledge money to Wing Kei Care Centre office before the day of event, or to the registration booth from 8:30 - 9:30am on the day of event.

Prizes will be awarded to **Walkathon participants** who submit the pledge forms with \$100 or more. For online donations, please attach a printed copy of your total pledges and attach to this pledge form (if applicable).

SPECIAL PRIZES WILL BE AWARDED TO THE FOLLOWING CATEGORY WINNERS:

- Top 3 Walkathon participants with the highest amount raised
- The 3 oldest senior participants

PLEDGE FORM

Please print clearly. Tax receipt will be issued for donations \$25 or more. Receipt will not be issued to those with unclear information.

請以正楷清楚填寫。贊助\$25或以上者可以獲發報稅收據。如資料不清晰將不能獲發報稅收據。

My Goal 我的籌款目標: \$ _____

Team Name (if applicable) 團隊名稱 (如適用): _____

Amount Pledged 籌款	\$100 — \$199	\$200 — \$299	\$300 — \$499	\$500 — \$999	\$1000 — \$1999	≥\$2000
T-shirt T-恤	1	1	1	1	1	1
Food Coupon 餐券	1	1	2	3	6	12
Draw Coupon 抽獎券	1	2	4	8	16	35

參加辦法:

- 填妥此表格
- 向支持者收集善款
- 於活動日之前交還表格及善款到榮基護理中心辦事處，或於活動當日上午8時30分至9時30分交回登記處

凡籌得\$100或以上的**步行者**可得以下獎品。若以互聯網募捐，請列印你的籌款總額並附加在這張籌款表格(如適用)

特別獎項將會頒給以下不同組別得獎者:

- 個人籌款金額最高之頭三名
- 年紀最長參加者之頭三名

SPONSOR FULL NAME 贊助人姓名 _____ ADDRESS 地址 _____ CITY 城市 _____ PROVINCE 省 _____ POSTAL CODE 郵政編號 _____ EMAIL 電郵 _____ PHONE 電話 _____ AMOUNT 金額 _____	SPONSOR FULL NAME 贊助人姓名 _____ ADDRESS 地址 _____ CITY 城市 _____ PROVINCE 省 _____ POSTAL CODE 郵政編號 _____ EMAIL 電郵 _____ PHONE 電話 _____ AMOUNT 金額 _____
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Please Make Cheque Payable to 支票抬頭請註明: **WING KEI**

Note: Please attach supplementary sheet if more space is required 如有需要請自行附加紙張

OFFICE USE ONLY	Received by: _____	Web Amount: _____	Amount Received: _____	Remarks: _____
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