valid email address Name:			Y/N
Address:			
Prov:	_ Postal code:	Phone: _	
Email:			Pledge Amount: _\$
Name:		Paid:	Y/N
Address:		City:	
Prov:	_ Postal code:	Phone: _	
Email:			Pledge Amount: _\$
Name:		Paid:	Y/N
Address:		City:	
Prov:	_ Postal code:	Phone: _	
Email:			Pledge Amount: _\$
Name:		Paid:	Y/N
Address:		City:	
Prov:	_ Postal code:	Phone: _	
Email:			Pledge Amount: _\$
Name:		Paid:	Y/N
Address:		City:	
Prov:	_ Postal code:	Phone: _	
Email:			Pledge Amount: _\$
Name:		Paid:	Y/N
Address:		City:	
Prov:	_ Postal code:	Phone: _	
Email:			Pledge Amount: _\$
Particinant Name		Phone:	Total: \$

Please print clearly! Tax receipts will be issued for pledges of \$20 or more and only if a

Please bring all pledge forms and pledges with you to the Sunday event!

ALLIES FOR AUTISM FOUNDATION 16th ANNUAL WALK / RUN

SUNDAY SEPT. 13, 2015



LOCATION:

ST MARY'S UNIVERSITY 14500 Bannister Road S.E.

Calgary, Alberta

WWW.ALLIESFORAUTISM.COM

Tel: 403-288-5723 email: alliesforautism@gmail.com

"Building support for autism through opportunity"

PLEASE REGISTER ONLINE AT WWW.ALLIESFORAUTISM.COM

REGISTRATION OPENS JULY 1ST

Race Day Itinerary:

Site Registration: 10:00 am - 11:00 am

Race Warm up - 11:15 am

Race start - 11:30 am

1.5 km Walk:

This is a fun walk around the grounds of St. Mary's University College that is suitable for families with very small children.

5km walk / run:

This is a recreational walk or run - you choose! It starts at St. St. Mary's University College and uses the Fish Creek pathway system. The terrain is flat and rolling with some uphill climbs

10 km Run:

This run has something for the more hard core runners. The route extends along both sides of Fish Creek on the pathway system between Bow Valley Ranch and St. Mary's University College. The terrain is flat with uphill climbs in and out of the valley.



Registration Options:
ndividual \$30 / Family \$60 (family of 4 - extra
persons \$10 each)

Family -	1 x \$60	\$
Extra persons	x \$10	\$
Individual	1 x \$30	\$
	Total:	\$

Registation includes a t-shirt / 2 for a family. Extra t-shirts can be purchased for \$10 each

In consideration of the acceptance of this entry form in the "Allies for Autism Run" ("Event")

1 /	`	
I, (name)		

For myself, my heirs, executors and assign, hereby release Allies for Autism and its successors, employees, officers, directors and agents, as well as any other persons or organizations assisting in the event (all of the foregoing) being collectively referred as the ("Released parties"), from any and all claims, demands, causes of action or damages whatsoever arising out of or resulting from any loss, injury or damage to any person or property that I may howsoever sustain or incur in connection with my participation in the Event or any activity necessarily incidental thereto, notwithstanding that such loss, damage or injury may be caused by, without limitation, the negligence of all or any of the Released Parties. I further acknowledge, that there are risks inherent in the activities to be under taken in the Event and that my participation could result in physical injury. I further acknowledge, however, that I am in the proper physical condition to participate in the Event.

Date: Sept. 15, 2013

Signature (Parent's signature if under the age of 18)

Child's name:	 	
Child's name:	 	
Child's name:		

PARTNERS:





SPONSORS:





The Ability Hub
Earl's Restaurant
Gord's Running Store
Centurion Mechanical

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Tel: 403-288-5723 | email: alliesforautism@gmail.com