

Saturday, May 12, 2018 Oakbank One Insurance Arena, Oakbank, MB

STEP 1 - Collect Donations

STEP 2 - Register (9:30am - 10:30am)

Online Registration Available: www.runningroom.com

STEP 3 - Walk/Run/Ride starts @ 11:00am (rain, shine, or snow)

STEP 4 - After Event - Free BBQ, Entertainment, Silent Auction Prizes, Etc.

WHERE DOES THE MONEY GO?

With money raised, AndrewDunn.org helps to sponsor a number of National Mental Health and Suicide Awareness and Prevention Conferences and many Awareness, Anti-Stigma and Educational Initiatives, several School Awards and Bursaries, Community Support and a Mental Health and Wellness Group, "Springfield Connections". Please visit our website to see our accomplishments and future goals.



Working in partnership with Mood Disorders Association of Manitoba



FOR MORE INFORMATION:

Contact Judy Dunn @ Mood Disorders: ph 204-444-5228 or jdmdam@gmail.com

www.andrewdunn.org

Regist	ration			
EVENT:	WALK [FUN RUN 5K□	10K 🗌	RIDE
ARE YOU PA	ART OF A TEAM Applicable)	M? 🗌		
ADDRESS				
ADDRESS CITY, PROVINC	CE, POSTAL CODE			

		7
14/4/1/	 	

DATE

EMAIL ADDRESS

Family/Friend

AGE ON EVENT DAY

HOW DID YOU HEAR ABOUT THE EVENT?

PARENT/GUARDIAN SIGNATURE

SIGNATURE (If under 18 parent or guardian must sign below)

I, the above signed, my heirs and/or administrators hereby waive, release and forever discharge the Andrew Dunn Organization, committee members, the Mood Disorders Association of MB, its Directors, Officers, agents, employees and volunteers or anyone associated with either organization, of and from all manner of actions, causes, suits, debts, claims and demands whatsoever in connection with The Andrew Dunn Walk Run and the Mood Disorders Association of MB. I assume full responsibility for any injury, accident, damage or harm arising as a result of my participation, in all Andrew Dunn Organization and Mood Disorders events, activities and programs. I am over the age of eighteen (18), legally competent to sign this waiver, and agree that the terms herein are contractual. I have read this waiver before voluntarily signing it. Further, I release the rights to an photos or video of me taken at the event for educational or promotional use.

☐ Please add me to the email list to learn about next year's event

Social Media

Radio TV Newspaper

Pledge Form

The Andrew Dunn Organization has been established for mental health education initiatives & suicide awareness & prevention.

Please ensure that name and complete mailing address is legible in order to receive your tax receipts with a donation of \$10 or more.

Please make cheques payable to: Andrew Dunn Memorial Fund MDAM CHARITABLE REG #: 128749520RR0001

NAME	ADDRESS (including postal code)	PHONE NUMBER	EMAIL	DONATION	TAX	PAYMENT METHOD
INVIVIL	ADDITESS (moldaling postal code)	THORE NOWDER	LIVITALE	AMOUNT	RECEIPT?	
						Cash Cheque Visa Mastercard
						Card Number:
						Expiry Date:
						Cash Cheque Visa
						Card Number:
						Expiry Date:
						Cash Cheque Visa Mastercard
						Card Number:
						Expiry Date:
						Cash Cheque Visa
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						Casii Crieque Visa Visa Vivasiericalu
						Card Number:
						Expiry Date:
						Cash Cheque Visa
						Card Number:
						Expiry Date:
						Cash Cheque Visa
						Card Number:
						Expiry Date:
All money must be in prior to 11am on May 12th 2018						