

USE THIS PLEDGE FORM TO COLLECT DONATIONS OR SAVE TIME AND FUNDRAISE ONLINE AT GUTSYWALK.CA

- You can help Crohn's and Colitis Canada devote more funds to the cause by waiving your gift card prize. Please indicate on this pledge form if you wish to waive your gift card prize.
- Only one prize per registered participant. Donations made to a team do not count towards individual prizes.
- Please allow eight to ten weeks for delivery of your gift card prize.

PRIZING NOTES:

*Crohn's and Colitis Canada reserves the right to substitute prizes of equal or greater value.

AMOUNT RAISED	PRIZE
\$100+	Gutsy Walk T-shirt
\$250+	\$10 Gift Card* + T-shirt
\$500+	\$25 Gift Card* + T-shirt
\$1,000+ TOP PLEDGE EARNERS CLUB	
\$1,000+	\$85 Gift Card* + T-shirt
\$2,500+	\$200 Gift Card* + T-shirt
\$5,000+	\$400 Gift Card* + T-shirt
\$10,000+	\$850 Gift Card* + T-shirt

Raise \$100 or more to be eligible for one of these exciting prizes:

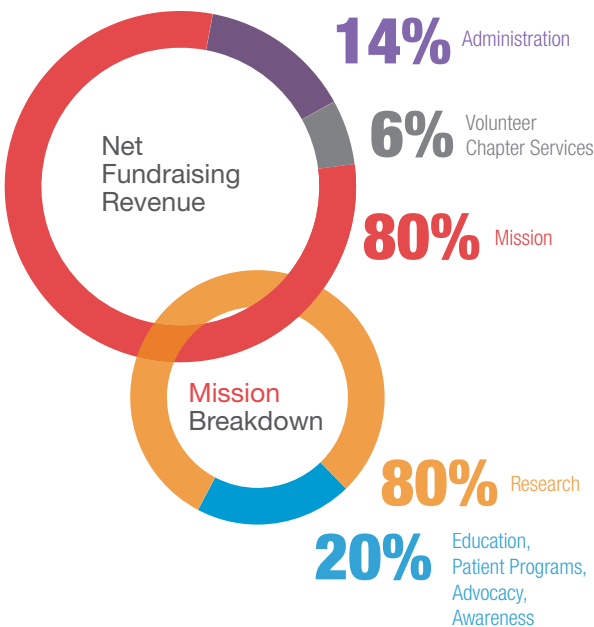
REWARDS

ABOUT CROHN'S AND COLITIS CANADA

Crohn's and Colitis Canada is the only national, volunteer-based charity focused on finding the cures for Crohn's disease and ulcerative colitis and improving the lives of children and adults affected by these diseases. We are one of the top two health charity funders of Crohn's and colitis research in the world and the largest non-governmental funder in Canada. We are transforming the lives of people affected by Crohn's and colitis (the two main forms of inflammatory bowel disease) through research, patient programs, advocacy, and awareness. Our **Crohn's & Colitis - Make it stop. For life.** campaign will raise \$100 million by 2020 to advance our mission.

FUNDING ALLOCATION

USE OF NET FUNDRAISING REVENUE



Visit crohnsandcolitis.ca/annualreport for more information and audited financial statements.



NATIONAL SPONSORS



Crohn's and Colitis Canada
 600-60 St. Clair Avenue East
 Toronto, ON M4T 1N5
 Tel: 416-920-5035 | 1-800-387-1479
support@crohnsandcolitis.ca
crohnsandcolitis.ca

Registered Charity | #11883 1486 RR 0001



FIND A WALK NEAR YOU. VISIT GUTSYWALK.CA TO

Taking place at over 60 locations across Canada, the Gutsy Walk is a fun-filled, family-friendly event in support of a great cause.

Sunday, June 3, 2018.

As Canada's largest community fundraiser for Crohn's and colitis, the Gutsy Walk has raised over \$35 million since its inception in 1996. The Gutsy Walk's success is all thanks to the support of participants, donors, and sponsors.

THE WALK

There are no known cures for Crohn's or colitis which is why we need you to walk with us.

Living with IBD means living a life full of disruptions. That's the case for over 250,000 Canadians already, and someone new is diagnosed with Crohn's or colitis every hour.

It takes guts to take on Crohn's disease and ulcerative colitis, the two main forms of inflammatory bowel disease (IBD). Crohn's and colitis are autoimmune diseases which cause the body to attack itself, leading to inflammation of all or part of the gastrointestinal tract. People with IBD endure abdominal pain, cramping, gas, bloating, fatigue, frequent and urgent bowel movements, internal bleeding, and unintended weight loss.

THE CAUSE

- A gift card* valued at \$85 or more
- An exclusive TPE gift
- An invitation to help kick-off your local walk

TOP PLEDGE EARNERS CLUB

- Ask - People want to make a difference, and they'll donate when you ask them to. Reach out to friends, family members, coworkers, and anyone else who you think might be interested in showing their support through a donation.
- Make a personal pledge - Set the tone for your fundraising campaign by making a donation of your own.

- Aim high with your fundraising goal - Committing to a high fundraising goal may feel daunting, but showing this level of dedication often leads to larger pledges from donors.
- Share your story - When talking to potential donors, share why the Gutsy Walk matters to you. Are you taking on IBD yourself? Are you inspired to walk because of a loved one who is? Share why funds need to be raised and the good those funds can do.

FUNDRAISING TIPS

You can raise funds for the Gutsy Walk by using this pledge form or online at gutsywalk.ca. If you use the pledge form, please bring it with you on walk day.

FUNDRAISING

CURES ARE STEPS AWAY

SUNDAY, JUNE 3, 2018
 Move us towards a future free from Crohn's disease and ulcerative colitis.

GUTSYWALK.CA
 FOR CROHN'S AND COLITIS CANADA

Matthew O'Halloran,
 2018 Gutsy Walk National Honorary Chair

2018 GUTSY WALK PLEDGE FORM

IMPORTANT DONOR INFORMATION:

- Please remember to print clearly.
- Do not record online pledges on the printable donation forms.
- Tax receipts will be issued for donations of \$15 or more.
- Tax receipts will only be issued if your address is completed in full and legible.
- If you provide an email address along with your physical address, you will receive your tax receipt by email rather than mail.
- All cheques must be made payable to Crohn's and Colitis Canada.

PARTICIPANT INFORMATION

Please Complete the Form

First Name _____ Last Name _____

Address _____ Apt.# _____

City _____ Province _____ Postal Code _____

Email _____

Preferred Tel # Home _____ Work _____

Preferred Language: English French

T-shirt Size (Youth M, S, M, L, XL, 2XL, 3XL): _____ Received T-shirt On-site

PRIZING* I would like to waive my prize so more funds can go towards the cause. Yes No

TEAM INFORMATION

I am participating as part of a: Family/Friends Team Company Team School Team

Team Name _____

Team Captain _____

Company Name/School Name _____

GENERAL INFORMATION

Age Range: 13 and Under 14-25 26-49 50+

Male Female

Do you know someone with Crohn's disease or ulcerative colitis?
No Myself Family Member Other

Are you a returning Gutsy Walk participant? Yes No

MY FUNDRAISING GOAL OF \$ _____ WALK LOCATION _____ (REQUIRED)

Donor Name Email Address / Telephone Number	Address	Credit Card Number and Expiry	Pledge Amount Payment Method	Consent to Receive Emails
First/Last _____ Email/Tel _____	<input type="checkbox"/> This is a Company City _____ Prov. _____ Postal Code _____	Expiry MM/YY _____	\$ _____ Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card <input type="checkbox"/>	Yes <input type="checkbox"/>
First/Last _____ Email/Tel _____	<input type="checkbox"/> This is a Company City _____ Prov. _____ Postal Code _____	Expiry MM/YY _____	\$ _____ Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card <input type="checkbox"/>	Yes <input type="checkbox"/>
First/Last _____ Email/Tel _____	<input type="checkbox"/> This is a Company City _____ Prov. _____ Postal Code _____	Expiry MM/YY _____	\$ _____ Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card <input type="checkbox"/>	Yes <input type="checkbox"/>
First/Last _____ Email/Tel _____	<input type="checkbox"/> This is a Company City _____ Prov. _____ Postal Code _____	Expiry MM/YY _____	\$ _____ Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card <input type="checkbox"/>	Yes <input type="checkbox"/>
First/Last _____ Email/Tel _____	<input type="checkbox"/> This is a Company City _____ Prov. _____ Postal Code _____	Expiry MM/YY _____	\$ _____ Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card <input type="checkbox"/>	Yes <input type="checkbox"/>
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First/Last _____ Email/Tel _____	<input type="checkbox"/> This is a Company City _____ Prov. _____ Postal Code _____	Expiry MM/YY _____	\$ _____ Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card <input type="checkbox"/>	Yes <input type="checkbox"/>
First/Last _____ Email/Tel _____	<input type="checkbox"/> This is a Company City _____ Prov. _____ Postal Code _____	Expiry MM/YY _____	\$ _____ Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Credit Card <input type="checkbox"/>	Yes <input type="checkbox"/>

I would like to pay the unpaid balance of my donors' pledges in full by credit card.
Credit Card # _____ Expiry MM/YY _____ Balance Paid \$ _____



Crohn's and Colitis Canada
600 - 60 St. Clair Avenue East, Toronto, Ontario M4T 1N5
416 920-5035 or toll free: 1 800 387-1479

PARTICIPANT TO COMPLETE:	FOR OFFICE USE ONLY:
Page Total \$ _____	Total Cash \$ _____
# of Pages _____ of _____	Total Cheque \$ _____
Total of all Paid Pledges \$ _____	Total Credit Card \$ _____
	Grand Total \$ _____

Waiver/Release: In consideration for participation in the 2018 Gutsy Walk ("Walk"), I waive and release any and all claims that I and/or my heirs, executors, administrators, agents, insurers, assigns and other legal representatives have or may have against Crohn's and Colitis Canada and its administrators, trustees, officers, directors, agents, employees, volunteers, successors, affiliates, sponsors and other legal representatives, both present and future for any accident, injury, illness, death or other claim, in law or equity, which may result, directly or indirectly, from my participation in the Walk. I permit the use of my name, amount raised, picture and video to be used in any and all forms and types of publicity produced in connection with the Walk or Crohn's and Colitis Canada including, but not limited to, the purposes of marketing, promoting or otherwise reporting relating to the Walk or Crohn's and Colitis Canada. I am physically fit to participate in the Walk. I have read, understand and agree with the content of this waiver/release prior to participating in the Walk. If participant is under the age of majority, I confirm I am the parent/guardian of participant and sign this waiver/release on his or her behalf.

Please indicate your email preferences:
 I would like to receive 'Talk About Guts' (e-newsletter) and occasional email updates from Crohn's and Colitis Canada.
 I do not wish to receive Gutsy Walk email communication.

Signature of Participant or Guardian (if under age of majority): _____ Date: _____