



Event	Scotiabank Toronto Waterfront Marathon Charity Challenge - 5k, ½ marathon, marathon		
Participant Name:		Email:	
Address:		City, Prov.:	
Postal Code:		Phone:	

Donor Name <i>(Please print clearly)</i>	Email	Address, City, Province	Postal Code	Phone #	Donation \$	PAID Cash or cheque	Receipt Requested (\$20+)
Make cheques payable to the ' Sick Kids Foundation: LFF '. ('LFF' = Liane Forrester Fund). Sick Kids Foundation will issue Charitable Donation Receipts.					Total \$ Collected		
Registered Charitable Organization Number 10808 4419 RR00001 (Internal Use Only: HSCF Appeal Code: 10ETWRFL)							
Hand in your donations/forms to your team captain or mail to: A Run for Liane, 46 Elkwood Drive, Scarborough, ON M1C 2C1. <i>Do not mail cash.</i>							