



## 卡城華人耆英會

編號 No.

## 關愛耆英健步行暨籌款表演 2026

## Caring For Seniors Walkathon &amp; Fundraising Show 2026

## WALKATHON REGISTRATION FORM 健步行報名表格

Name 姓名 \_\_\_\_\_ (First name) \_\_\_\_\_ (Last name) Telephone 電話 (\_\_\_\_) \_\_\_\_\_

Address 地址 \_\_\_\_\_ Postal code 郵政編碼 \_\_\_\_\_

Membership no. 會員號碼 (if applicable 如適用) \_\_\_\_\_

T-shirt size T 恤尺碼 S: \_\_\_ M: \_\_\_ L: \_\_\_ XL: \_\_\_ (Please indicate the required number of T-shirt 請填寫所需 T-shirt 數量)

Please refer to the following rules and sign the declaration 請參閱以下規則並簽署聲明

**DECLARATION 聲明:**

I, the undersigned hereby agree on my behalf or that of my minor child that: I voluntarily participate in this Walkathon event, fully aware of the potential risks involved. In the event of any personal injury, death, or property loss arising from my participation, I will not pursue any legal action or compensation claims against the Calgary Chinese Elderly Citizens' Association, or any of its related individuals, directors, staff, volunteers, sponsors, organizations, groups, departments, or committees. I confirm that I am physically fit and capable of participating in this event. I also grant permission to the organizer to use any photographs, videos, or audio recordings related to this Walkathon event, in which I appear, for news, publicity, marketing, promotional, archival, or security purposes at any time.

本人/代表本人未成年子女，謹在此聲明及同意：本人自願參加是次健步行籌款活動，並已考慮到參加有可能帶來多方面的風險。若本人因參與是次活動而引致身體受傷，或死亡或財物損失，本人絕不向卡城華人耆英會或其有關之任何個人、理事、職員、義工、贊助商、機構、團體、部門、小組等作任何法律訴訟，或索取任何賠償。本人體格正常，並有足夠體力參與是次活動。本人准許大會把是次步行籌款活動，有關本人的照片、錄像、錄音在任何時候作新聞、宣傳、營銷、推廣、存檔或保安等任何有關用途。

Signature 簽名: \_\_\_\_\_ Date 日期: \_\_\_\_\_

**How to Donate 捐款方法**

Prizes will be awarded for those pledged \$150 or above, based on the total amount indicated on each pledge form.

籌得善款滿 150 元或以上可獲以下獎品，以每張贊助表格總額計算

- Fill out the pledge form (name, phone, address, email & amount)
- Collect pledged donation from sponsors
- **Please return all pledged donation on or before July 31, 2026 to CCECA**

- 填妥贊助表格 (贊助人姓名、電話、地址、電郵、捐款額)
- 請向贊助人收集善款
- 請將所有贊助善款於 7 月 31 日前交回耆英會

Amount Pledged 籌得款項	\$150- 300	\$301- \$600	\$601- \$900	\$901- \$1500	\$1500 above
Prizes 獎品					
Souvenir 紀念品	1	2	3	4	5
Draw Ticket 抽獎券	5	10	15	20	30

Amount Pledged 籌得款項	\$150- 300	\$301- \$600	\$601- \$900	\$901- \$1500	\$1500 above
T-shirt T 恤					
Individual 個人	1	1	1	1	1
Team 團隊	1	2	3	4	5

Registration and inquiry 報名及查詢

111 Riverfront Avenue SW, Calgary, Alberta T2P 4Y8  
(403) 269-6122 www.cceca.ca

**PLEDGE FORM 贊助表格**

(Please print your name &amp; address in English if you request a tax receipt 如需要報稅收條, 請用英文填寫姓名及詳細地址)

Sponsor's Name 贊助者姓名	Member-ship No. (If any) 會員號碼 (如有)	Amount Donated 贊助金額	Tax receipt 報稅收條 (Please tick 以☑示意)	Sponsor's full address Postal code 贊助者詳細地址	Phone 電話	Email 電郵	Program Receipt # 活動收條編號
1. (First)  (Last)			<input type="checkbox"/> #				
2. (First)  (Last)			<input type="checkbox"/> #				
3. (First)  (Last)			<input type="checkbox"/> #				
4. (First)  (Last)			<input type="checkbox"/> #				
5. (First)  (Last)			<input type="checkbox"/> #				
6. (First)  (Last)			<input type="checkbox"/> #				
7. (First)  (Last)			<input type="checkbox"/> #				
8. (First)  (Last)			<input type="checkbox"/> #				
9. (First)  (Last)			<input type="checkbox"/> #				
10. (First)  (Last)			<input type="checkbox"/> #				

Pledged Amount 總額: \$ \_\_\_\_\_

**NOTES TO SPONSOR:**

- Tax receipt will be issued for donation of \$30 or above
- Please submit your donation to your designated walker(s) prior to the Walkathon on good faith.
- Please make cheque payable to "CCECA" and the receipt will only be issued to the chequing account bearer only.
- All receipts will be given to the designated walker(s) and forwarded to all sponsors.

**贊助者須知:**

- 捐款 30 元或以上者可獲發報稅收條。
- 請於健步行籌款活動前, 把捐款交給你指定的參加者。
- 若以支票捐款, 支票抬頭為 "CCECA"。報稅收條只會發給支票戶口的持有人。
- 所有收條將會透過參加者分發給各贊助者。

<b>Office Use Only</b>	<b>Date:</b>	<b>Received by:</b>	<b>Total:</b>
<b>Amount Received:</b>	Amount: \$	Tax Amount: \$	

## TEAM DECLARATION 團隊聲明

**Team Name 團隊名稱:** \_\_\_\_\_ **Contact 團隊聯絡人:** \_\_\_\_\_ **Tel No 電話:** \_\_\_\_\_

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**Team Contact Signature 團隊聯絡人簽名:** \_\_\_\_\_ **Date 日期:** \_\_\_\_\_

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

Name of Team Member 成員姓名	Telephone 電話	Please sign to agree to the above declaration 同意以上聲明請簽名
1.		
2.		
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