

## CELEBRATING 25 YEARS IN THE COMMUNITY!

Doane House Hospice is a not-for-profit, volunteer based, community hospice providing care to individuals, and their families, coping with life-threatening illnesses.

We also offer support and art therapy to caregivers and the bereaved. We cover the communities of Newmarket, North Aurora, East Gwillimbury, and Bradford.

## HOW IS DOANE HOUSE HOSPICE FUNDED?

DHH needs to raise 80% of its annual budget. We receive 20% Provincial Funding through Local Health Integrated Networks (LHINs).

All our programs and services are offered at no cost to our clients.

## WHAT IS THE HIKE FOR HOSPICE?

DHH invites you to participate in our 2015 Hike for Hospice fund-and-friend-raiser! The Hike for Hospice is an opportunity to engage the community in raising awareness about the Hospice and to raise funds in order to continue offering care. Wear purple to show your support for Doane House or wear your Company colours to support your team!

## WHEN AND WHERE IS THE HIKE FOR HOSPICE?

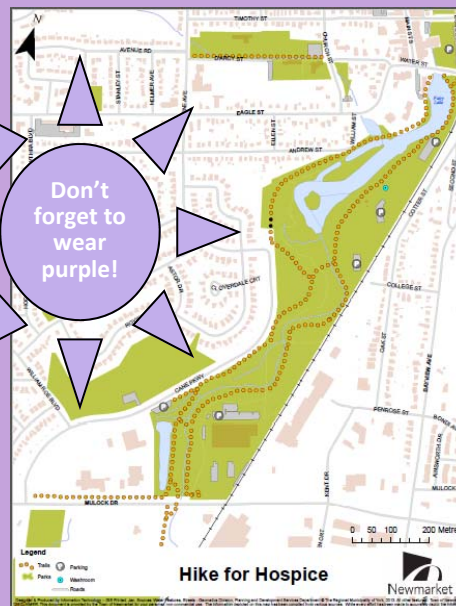
Please join us on May 3rd at Fairy Lake, Water Street, Newmarket at 9:00am for registration, speeches and refreshments. The Hike will commence at 10:00am and will end with a BBQ at the start/finish line in Fairy Lake. You are welcome to complete the short or the long walk around Fairy Lake.

## HOW DO I REGISTER TO PARTICIPATE IN THE HIKE?

To support this fundraiser, please use the pledge form included in this brochure to collect pledges or visit our website at: [www.doanehospice.org](http://www.doanehospice.org)

Registration Fee—\$25.00  
Minimum pledges per registrant—\$50.00  
There is no registration fee for children under 12 years of age.

Registration includes BBQ, Entertainment, Refreshments, Yoga and Massage.  
For more information and to RSVP your attendance, please contact us at: 905-967-0259



## SUNDAY MAY 3, 2015 FAIRY LAKE, NEWMARKET

Registration \$25.00 per person includes BBQ, Entertainment, Refreshments, Yoga Warm-Up and Massage.  
Children under 12 free.

Support us today to ensure we are here tomorrow by registering individually, in a team or pledging a donation.

## Hike4Hospice



Doane House  
HOSPICE

laughter • friendship • support • hope

CHARITABLE REGISTRATION NO.:  
14033 7437 RR001



PRESENTED BY:

**TORICAN**  
WASTE REDUCTION MANAGEMENT

# 2015 HIKE FOR HOSPICE REGISTRATION & PLEDGE FORM

**SUNDAY, MAY 3, 2015 10:00 A.M.—12:00 P.M. REGISTRATION 9:00 A.M.**

Please print clearly and make all cheques payable to "Doane House Hospice" - please write "Hike for Hospice" in the Memo Section.

Please note, tax receipts are issued only for donations of \$20 or more. Charitable Registration Number: 14033 7437 RR0001

| Name | Complete Address<br>(street, city, province, postal code) | Email address | Phone | Pledge Amount | Cash or Cheque | Receipt Reqd.?<br>Yes/No |
|------|---|---------------|-------|---------------|----------------|--------------------------|
|      |   |               |       |               |                |                          |
|      |   |               |       |               |                |                          |
|      |   |               |       |               |                |                          |
|      |   |               |       |               |                |                          |
|      |   |               |       |               |                |                          |
|      |   |               |       |               |                |                          |
|      |   |               |       |               |                |                          |
|      |   |               |       |               |                |                          |
|      |   |               |       |               |                |                          |
|      |   |               |       |               |                |                          |
|      |   |               |       |               |                |                          |
|      |   |               |       |               |                |                          |
|      |   |               |       |               |                |                          |
|      |   |               |       |               |                |                          |
|      |   |               |       |               |                |                          |
|      |   |               |       |               |                |                          |
|      |   |               |       |               |                |                          |

## **The Doane House Hospice Hike for Hospice Agreement, Release and Indemnity:**

I AGREE that at all times during the Doane House Hospice Hike for Hospice event my safety remains my sole responsibility. In consideration of the acceptance of my registration form as an entrant in the Hike for Hospice, I, for myself, my heirs, executors, administrators, successors and assigns HEREBY RELEASE, WAIVE and FOREVER DISCHARGE Doane House Hospice, its staff and volunteers, the sponsors of this event, the Town of Newmarket OF AND FROM ALL claims, demands, damages, costs, expenses, actions, causes of action, whether as a spectator, participant or otherwise, whether prior to, during or subsequent to the event. I FURTHER HEREBY UNDERTAKE TO HOLD AND SAVE HARMLESS and AGREE TO IDEMNIFY all of the aforesaid from and against all liability incurred by any or all of them arising as a result of, or in any way connected with my participation in this event.

By submitting this entry, I acknowledge having read, understood and agreed to the above release, waiver and indemnity. I warrant that I am physically fit to participate in this event and grant permission for all photos that may be taken at the event to be used without compensation in any Hospice print or promotional materials such as but not limited to their website, annual report, brochures.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Parent/Guardian initials:** \_\_\_\_\_