

TERRY FOX RUN FOR CANCER RESEARCH

SUNDAY, SEPTEMBER 14



Name: _____

Address: _____

City: _____ Prov: _____ Postal Code: _____

Tel: _____ Email: _____

Run Site Location: _____

Team Name: _____

THIS IS MY _____ [#] RUN!!!

Cheques payable to the Terry Fox Foundation

| | | | |
|---|--|----------------|--|
| NAME: John Smith | TEL: 123 456 7890 | \$45.00 | <input type="checkbox"/> CASH |
| APT: 301 ADDRESS: 321 Every Street CITY: Everytown | POSTAL CODE: L 0 L 1 L 0 | | <input checked="" type="checkbox"/> CHEQUE |
| Full mailing address required for tax receipt EMAIL: johnsmith@gmail.com | | PROV: Ontario | |

Help us save \$1+ in postage: include your address and email.

AMOUNT COLLECTED

| | | | |
|---|-------------|-------------|-------------------------------|
| NAME: _____ | TEL: _____ | \$ | CASH <input type="checkbox"/> |
| APT: _____ ADDRESS: _____ | CITY: _____ | | POSTAL CODE: |
| Full mailing address required for tax receipt EMAIL: _____ | | PROV: _____ | |
| NAME: _____ | TEL: _____ | \$ | CASH <input type="checkbox"/> |
| APT: _____ ADDRESS: _____ | CITY: _____ | | POSTAL CODE: |
| Full mailing address required for tax receipt EMAIL: _____ | | PROV: _____ | |
| NAME: _____ | TEL: _____ | \$ | CASH <input type="checkbox"/> |
| APT: _____ ADDRESS: _____ | CITY: _____ | | POSTAL CODE: |
| Full mailing address required for tax receipt EMAIL: _____ | | PROV: _____ | |
| NAME: _____ | TEL: _____ | \$ | CASH <input type="checkbox"/> |
| APT: _____ ADDRESS: _____ | CITY: _____ | | POSTAL CODE: |
| Full mailing address required for tax receipt EMAIL: _____ | | PROV: _____ | |



Scan this QR code and collect pledges online as well!

SUBMITTING PLEDGE SHEETS:

1. Bring pledge sheet(s) to event – completed pledge sheet(s) and funds may be submitted at that time.
- OR
2. Mail this pledge sheet(s) and cheques (no cash, please submit a cheque for cash donations) to your provincial office - addresses on back.

Please submit no later than Friday October 24, 2025.

| | |
|----------------------|-----------|
| TOTAL (FRONT) | \$ |
| TOTAL (BACK) | \$ |
| TOTAL (FRONT & BACK) | \$ |

| | | | | | | | | | |
|---|--|--|--|-------|--|--|--|----|---------------------------------|
| NAME: | | | | TEL: | | | | \$ | CASH <input type="checkbox"/> |
| APT: ADDRESS: CITY: POSTAL CODE: | | | | PROV: | | | | | CHEQUE <input type="checkbox"/> |
| Full mailing address required for tax receipt | | | | | | | | | |
| EMAIL: | | | | PROV: | | | | | |
| NAME: | | | | TEL: | | | | \$ | CASH <input type="checkbox"/> |
| APT: ADDRESS: CITY: POSTAL CODE: | | | | PROV: | | | | | CHEQUE <input type="checkbox"/> |
| Full mailing address required for tax receipt | | | | | | | | | |
| EMAIL: | | | | PROV: | | | | | |
| NAME: | | | | TEL: | | | | \$ | CASH <input type="checkbox"/> |
| APT: ADDRESS: CITY: POSTAL CODE: | | | | PROV: | | | | | CHEQUE <input type="checkbox"/> |
| Full mailing address required for tax receipt | | | | | | | | | |
| EMAIL: | | | | PROV: | | | | | |

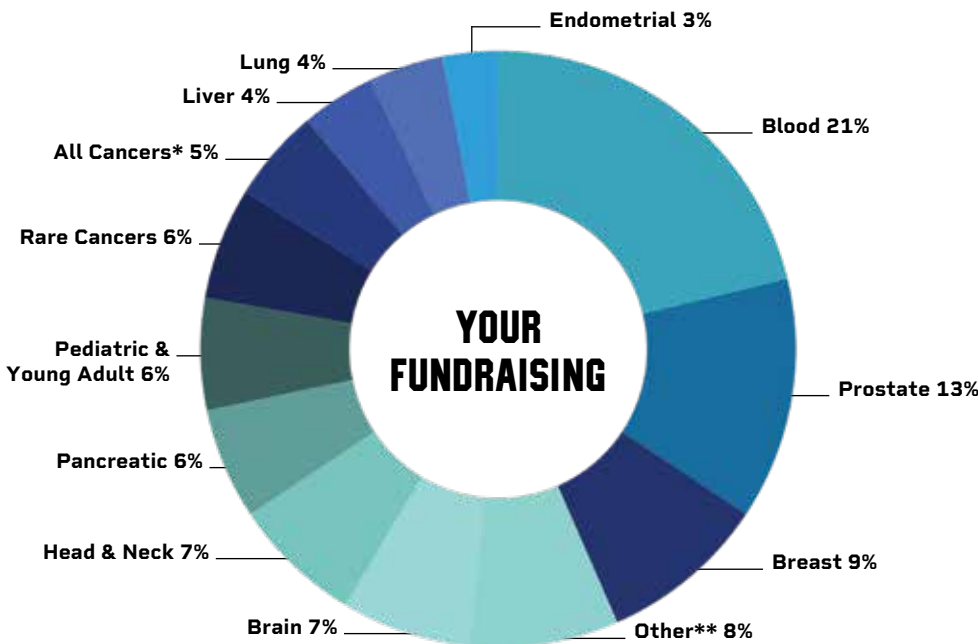
Include your email to receive your tax receipt faster.

| |
|----------------------|
| TOTAL (ADD TO FRONT) |
| \$ |

RESEARCH MADE POSSIBLE BY YOU

When you fundraise or donate in Terry's name, you invest in the future of cancer research through the Terry Fox Research Institute (TFRI).

Thanks to you, TFRI supports the best and brightest scientists – world-class teams of established pioneers and rising stars – working on the most innovative “outside the box” projects with the potential to save and improve lives.



* This category includes our investment in projects that have non-specific cancer types.

** This category includes our investment in cancer types that received less than 3% of our annual funding, including colorectal cancers, gastrointestinal cancers, melanoma, ovarian cancers, cervical cancers, myeloma and sarcomas.

CONTACT US

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