

*Women's Support Network of York Region presents*

*“Walk For Safe and Healthy  
Communities...Ending Sexual Violence,  
One Step at a Time” 2010*



## *About the Event*

*What is this walk about?*

For the past 2 years a group of women, men and youth came together and made Herstory. Some wonderful changes, new partnerships and awareness has come from the nights spent crossing York Region on foot. This 3<sup>rd</sup> annual walk is about using our vision & voice for further Community Building & Direct Action for Social Change. This is *A Walk towards Political Action and Change!*

*Be the change you want to see.*

*Create the world you want to live in.*

This walk is about bringing awareness in positive and encouraging ways, to the issues of sexual violence in our communities...in every community. This walk is about Walking our Talk.

### **Before You Register: The Important Things to Know**

- ✓ All donations are non-refundable and non-transferable.
- ✓ If you are walking as a representative from another agency, monies raised will be split 50/50 between WSN and the agency you are affiliated with.
- ✓ All participants must sign the waiver before walking.

## How do I register for the Walk?

E-mail the Women's Support Network at [generalinfo@womenssupportnetwork.ca](mailto:generalinfo@womenssupportnetwork.ca) to receive a registration package, or call 905-895-3646 and we will be delighted to send you a registration package.

There is a facebook 'events' page listed as: WSN's 2010 "Walk For Safe and Healthy Communities...Ending Sexual Violence, One Step at a Time".

Go to Women's Support Network of York Region's main facebook page, to join the group invite others to join, and for all the latest updates regarding the event.

## Options for participating:

### ✦ Option 1:

#### Sunday June 6<sup>th</sup>, 2010

Walk from East end to West end of York Region, along 16<sup>th</sup> avenue, and then south on Islington, ending at Woodbridge Pool and Memorial Arena (corner of Hwy 7 & Islington Avenue, Woodbridge).

- Registration: 12:00am – 1:00am, Woodbine and 16<sup>th</sup>,
- Walk starts at 1:00am at Woodbine and 16<sup>th</sup> and ends at Hwy 7 and Islington

### ✦ Option 2:

#### Virtual 60 X 60 Walk

Walk on your own time, at your own pace, by yourself, or as part of a team. With the new "Virtual 60 X 60 Walk", walkers can split the 60km amongst a group or do it on their own throughout the month of May. Each individual will aim towards raising \$60 for the cause of safe and healthy communities, and ending sexual violence. A community safety awareness calendar will be available to track your progress.

Note: If you are walking as a representative from another agency, monies raised will be split 50/50 between WSN and the agency you affiliate with upon registration.

## How far do we walk?

The 1 night route covers approximately 30 km's. Walkers will gather at the pre-planned meeting location to begin the walk.

## What if I can't walk that far?

If you are unable to continue walking while out on the route, one of our support vehicles will transport you to the next 'pit stop', where you can rest and either end your participation, or wait to welcome in the remaining walkers! Your safety is always our first concern.

## Do I need permission from my doctor in order to participate?

Walkers and crew members of 1 night walk who have significant medical history (or are pregnant) are asked to discuss their participation with their personal physician and get a letter of authorization in order to participate. For walkers and crew who are pregnant, this letter must be provided by their obstetrician.

#### **Do I have to carry all my gear while I am walking?**

Yes, walkers will need to dress and pack whatever belongings they feel are needed for the walk.

#### **Do I have to bring my own water and snacks?**

No. WSN will be providing water, and nutritious snacks along the way. At every rest point food and water will be made available for all walkers.

### **Volunteers**

#### **What do volunteers do?**

Volunteers are always welcome. It's a way to stay flexible and still contribute your time, expertise and ideas to help make the Walk a success. From outreach and recruitment, to training and motivating participants, to on-event roles and responsibilities, there is a volunteer role to fit your schedule, skills and passions.

#### **How do I register to become a volunteer?**

Email: [generalinfo@womenssupportnetwork.ca](mailto:generalinfo@womenssupportnetwork.ca) or call 905-895-3646.

We will send details about all the volunteer opportunities available and next steps and meetings.

### **Donations/Fundraising**

#### **If I can't participate in the event, what happens to the donations that I have raised?**

All donations submitted to the 2010 Walk are non-transferable and non-refundable. If you are unable to participate in the event, your donations cannot be refunded. Your donations will go directly to the cause as if you had participated, and we hope your donors will appreciate supporting the agency/agencies regardless of your participation in the actual event.

#### **How do the beneficiaries utilize the contributions?**

All proceeds directed to the Women's Support Network of York Region, go directly to servicing women and girls who are survivors of sexual violence. All monies earned go directly toward supporting our mandate of eradicating sexual violence from our community, for example:

- **\$1400 provides a woman with counseling for one year.**
- **\$4030 provides for the delivery of 31 public education presentations in York Region schools, and the broader community.**
- **\$140.00 provides for the delivery of a workshop/seminar to a group.**

**Where do I submit my pledge money and pledge collection form?**

Donations and pledge collection forms can be handed in at the registration table on the night of the walk, or delivered to WSN table at the Closing Ceremony/Community Breakfast on June 6<sup>th</sup>, 2010. Before the event, donations can be delivered to the Women's Support Network at 1110 Stellar Drive Unit 109, Newmarket Ontario, L3Y 7B7

**Who should I make my cheque out to?**

Please make all cheques payable to: Women's Support Network Of York Region.

**Are donations tax-deductible?**

Yes. All monetary donations are tax-deductible to the extent allowed by law.

**Do all donors receive a receipt?**

A minimum amount of \$20.00 raised is required to receive a tax receipt.



# Walk 2010

## Registration Form

### Walker Information

Full Name:

Address:

City/Province:

Postal Code:

Phone:

E-mail address:

Date of Birth

Agency Affiliation (if applicable):

### **Emergency Contact Information**

Name

Relationship to Walker

Phone Number

Alternate Number

We ask that all participants register for the walk by May 15, 2010. Registration can be done through email at [generalinfo@womenssupportnetwork.ca](mailto:generalinfo@womenssupportnetwork.ca), by fax at (905)895-6542, or through mail or in person at 1110 Stellar Drive, Unit 109, Newmarket, Ontario, L3Y 7B7. Waivers must be signed before walking.



women's support network  
of york region

**Waiver and Release of Liability**

(Please read and sign below.)

I wish to participate in Women's Support Network Take Back the Night Walk benefiting the Women's Support Network of York Region, An approximately 30 kilometre walk, scheduled to take place in York Region on June 6<sup>th</sup>, 2010 and I agree to abide by the rules, regulations, and event instructions of the event, as well as all applicable municipal and provincial laws and regulations.

I understand that participating in such an event, using public streets and facilities and the use of and participation in services made available to participants during the event (and medical services), is a potentially hazardous activity and can result in serious injury or death. I am aware of and expressly assume all risks associated with participating in this event, including, without Limitation, falls, contact with other participants and objects, the effects of weather, traffic, and the conditions of the streets and route used by the event and assert that my participation in this event is voluntary.

In consideration for being permitted to participate in this event, I, for myself and for anyone entitled to act on my behalf, hereby waive and release from any and all claims for injuries and damages I may have arising out of the event or my participation in the event (including without limitation any pre- and post-event activities), against The Women's Support Network of York Region, the Municipality of York Region, the Province of Ontario, Canada, any beneficiaries, sponsors, officials, participating clubs, communities, organizations, friends of the event, Walkers, participants, third-party vendors, government or public entities (including, without limitation, the Department of Transportation), and their respective affiliates, successors, officers, directors, employees, volunteers, agents and representatives, including, without limitation, the event medical sponsor, the medical director, and members of the medical team.

**I intend by this Waiver and Release to release, in advance, and to waive my rights and to discharge all of the persons and entities mentioned above, from all claims for damages for death, personal injury or property damage that I may have, or which may hereafter accrue to me, as a result of my participation in this event, even though that liability may arise from negligence, carelessness, or recklessness (whether simple or gross) on the part of the persons or entities being released, from dangerous or defective property or equipment owned, maintained or controlled by them or because of their possible liability without fault. I understand and agree that this Waiver and Release is binding on my heirs, assigns, and legal representatives.**

I attest that I am physically capable of, and have sufficiently trained for, completing this event. If I am aware of or under treatment for any physical infirmity, ailment, or illness, my medical care provider has been apprised of, and has approved of, my participation in this event. I acknowledge that I and I alone, am solely responsible for my personal health and safety, and the personal property I bring with me. I consent to receive medical treatment which may be advisable in the event of illness or injuries suffered by me during this event, and I agree to pay for the costs of any such medical treatment.

I agree that my participation in the event is subject to the sole discretion of the organizers of the event, and that my participation may be limited or terminated, with or without cause.

I represent and warrant that I will be at least 16 years old at the time of the event. If I am under the age of 18 I understand I MUST have a guardian accompany me on the event as a fellow registered participant.

I understand that all donations processed by The Women's Support Network of York Region are non-refundable and non-transferable, even if I do not participate in the event.

I understand that The Women's Support Network of York Regions, Take Back the Night Walk, and all its related events, are public events which may be recorded and so I give permission for the free use of my personal information including name, voice or likeness observed at these public events, in any broadcast, telecast, advertising promotion or other account of this event for marketing or promotion for future or similar events.

**THIS WAIVER AND RELEASE SHALL BE INTERPRETED AND THE RIGHTS OF THE PARTIES DETERMINED UNDER THE LAWS OF THE PROVINCE OF ONTARIO. THE ONTARIO COURTS SHALL HAVE EXCLUSIVE JURISDICTION FOR ANY DISPUTE ARISING UNDER, OR PERTAINING TO, THIS WAIVER AND RELEASE.**

I have carefully read this Waiver and Release and fully understand its contents. I am aware that this is a release of liability and a binding contract between myself and the persons and entities mentioned above and I sign it of my own free will. I understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing this Waiver and Release freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_