

# Illuminight

Juravinski Hospital  
and Cancer Centre  
Foundation



## OCTOBER 8-17, 2021

To register and fundraise online visit:  
[www.hamiltonhealth.ca/illuminight](http://www.hamiltonhealth.ca/illuminight)

OR complete the form below.  
One form per participating individual.

Participant Name: \_\_\_\_\_ Team Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_

Are you:  Current/former cancer patient  Supporter of current/former patient  HHS employee/physician  Community Member



Charitable Reg# 131159543 RR0001

### Donations Collected

(Please photocopy form for more donors)

Donor Name (Print clearly)	Donor Address	Postal Code	Donor E-mail	Amount**

Please make cheques payable to *Hamilton Health Sciences Foundation*.

\*\* Only donations of \$10 or more will be issued a tax receipt. Information must be legible to be receipted.

All funds must be received and pledges verified online by 4 p.m. on Wednesday, October 15, 2021 to qualify for Illuminight fundraising prizes and draws.

Privacy Note: Hamilton Health Sciences Foundation respects your privacy and is committed to protecting your personal information. We do not share, rent, trade or sell any of the personal information we collect. The information we collect is used to keep you informed of Foundation activities. If, at any time, you wish to be removed from our list or to obtain a copy of our Information Privacy Policy, please contact us at (905) 522-3863 or via email at [info@hamiltonhealth.ca](mailto:info@hamiltonhealth.ca).

Total Submitted \$

Signature: \_\_\_\_\_

By signing, I acknowledge that I have read and agree to the event waiver posted online at [www.hamiltonhealth.ca/illuminight](http://www.hamiltonhealth.ca/illuminight) and available onsite at *Illuminight*.