

Calling all
Jingle Bell
Runners . . .

Take fun and fitness
to a new level!

Join The Arthritis Society's Joints in Motion
Training Team

Join the 2004 Alberta Joints in Motion Training Team
You are eligible for these benefits:

- Round-trip airfare.
- Hotel accommodation.
- 18-20 week personalized marathon training program.
- Personalized pre-training program for novice runners/walkers.
- Clinics on injury prevention, nutrition for endurance athletes, footwear and successful fundraising.

2004 Marathon Destinations

- Lisbon, Portugal
- San Diego, USA

Yes! I would like more information about the
Joints in Motion Training Team program.
Please send me more information.

I would like to attend an information
session.

For more information, please call
1-800-321-1433
or visit our website at
www.arthritis.ca/jointsinmotion



LETHBRIDGE



Saturday November 15, 2003

Under the Grandstand next to
Bully's Sport
& Entertainment Centre

10km Run
5km Walk/Run
1km Walk

Raise \$100 or more and enter
to win fabulous prizes!



Your Registrations Fee includes:

(while quantities last)

- Commemorative Jingle Bell Run long sleeve T-shirt.
- DEW Bell.
- Post run food and fun.

Prizes are awarded for fundraising, costumes and general draws.

Helpful Hints for Raising Money

- Start collecting pledges early.
- Sponsor yourself first! Donate \$10 or \$20 and your sponsors will follow your example!
- Collect donations from family, friends and co-workers at the time of asking.
- Set your fundraising goal high.
- Ask your company to match your total donation amount.
- Photocopy your donation records before submission in case you need to make any follow-ups.
- Donations of \$10 or more will receive a tax receipt.
- Submit team donations together.

More than four million Canadians, or 400,000 Albertans, live each day with the pain and decreased mobility caused by arthritis. This disease does not discriminate; it can affect men, women and children of all ages.

• arthritis and related disorders cost the Canadian economy \$17.8 billion each year.

• arthritis is the most common cause of disability – it causes about 25 per cent of all long term disability cases.

• Canadian researchers are studying the triggers which contribute to chronic inflammation; isolating these triggers may hold the answer to a cure!

Entry Form and Waiver

10km run 5km run/walk 1km walk

Name: _____

Male Female

Address: _____

City: _____ Postal Code: _____

Res. Phone: _____ Work Phone: _____

E-mail: _____

Payment: \$ Cash/Cheque Visa/MC/AMEX

Card #: _____

Expiry: _____

Signature: _____

Wheelchair Entry
 10 and under(5k) 11-14 15-19 20-29
 30-39 40-49 50-59 60-69 70+

In consideration of The Arthritis Society accepting this, my entry, I hereby, both for myself and my heirs, waive any and all claims, for damages (whether for personal injury, death, illness or for negligence), which I may have as a result of my participation in, or attendance at, this race, and release from liability for such claims the following: The Arthritis Society, the Race Director, his committee, officials and volunteers working the race, Race Sponsors and their employees and agents, the local municipality and its employees and agents, and other participants in the race.

Date: _____

Signature: _____

Signature of
Parent or Guardian

(if under 18 years of age)

Where did you pick up this form? _____

Individual Entry Team Entry

Team name: _____

All team entries must be submitted together. Up to 4 members per team.
Fax this form to: (403) 328-1424
or mail to: The Arthritis Society,
4B 740 4th Avenue South, Lethbridge, AB T1J 0N9.

Race Information



Race Date

Saturday, November 15, 2003

Costume Judging: 1:30 p.m.

Race Starts: 2:00 p.m. Sharp!

Award Ceremonies and Prizes: to follow race

Check in at the judges table prior to race time for costume judging and to qualify for great prizes

Venue

Under the Grandstand, next to Bully's Sports and Entertainment Centre. Free parking/disabled parking available.

Register Today:

General: \$ 25.00 (\$30.00 after October 31)

Youth (14 and under): \$15.00

Enter Early! You receive a long sleeved T-shirt, jingle bell and a race kit (while quantities last). Competitive Runners must register before 5:00 pm Friday, November 14 to receive your race number.

This is a fundraising event. All participants are expected to raise pledges.

To Enter

MAIL or FAX your entry form by October 31st to : The Arthritis Society
Suite 4B, 740 4th Avenue South
Lethbridge Alberta T1J 0N9
Fax: (403) 328 - 1424

Drop off entry forms at: Runners Soul
2646 South Parkside Drive
Lethbridge, AB

Make cheques payable to The Arthritis Society.

Race Kit Pickup

Thursday, November 13, 10:30 a.m. to 9:00 p.m.

Friday, November 14, 10:30 a.m. to 5:00 p.m.

Runners Soul 2646 South Parkside Drive, Lethbridge, Alberta. Make cheques payable to The Arthritis Society.

Costumes

Show your holiday spirit! Dress in festive costume. Best individual costume award: A flight lesson.

Team Challenge

Challenge your colleagues to form their own team and compete in the Team Challenge.

Course Info

Course marshals must be obeyed at all times. Detailed map posted at the event. Official times will be recorded.

Prizes and Awards Presentations

Provincial Grand Prize: Submit \$1500 minimum in pledges by the day of the race to qualify for a trip for two to San Diego in June 2004.

The Arthritis Society, Alberta and Northwest Territories Division, is committed to improving the quality of life for people affected by arthritis and to support proactive efforts directed towards prevention, diagnosis, treatment and a cure for arthritis.


Donation Record

Raise money and win prizes!! Prizes will be awarded to highest fundraisers.

You are encouraged to raise money in support of The Arthritis Society by running or walking the course on race day. You may choose to collect donations for yourself, sponsor someone else or make a donation to The Arthritis Society.

Race Participant's First Name	Initial	Last Name	Age	Telephone (Residence)
Company/Team Name (If Applicable)				Telephone (Business)
Address	Postal Code	Email Address		

Name of Donor (First Initial, Last Name)	Address (Include City)	Postal Code	Telephone	Donation

All cheques are made payable to: 

Charitable Reg.No. 10807-1671-RR0007
Tax Receipts will be issued for amounts of \$10 or more, prior to February 28.

Total this page	*
Total Verified	

ALL PROCEEDS TO THE ARTHRITIS SOCIETY

Payment Type: Cash \$ _____ Cheque \$ _____

Visa/Mastercard/Amex \$ _____ Card # _____ ExpiryDate _____ Signature _____
Privacy Statement: In recognition of the unique commitment you have made to The Arthritis Society, you will be pleased to know that your personal information won't be sold or traded. We maintain records of all contributions to The Arthritis Society for the purpose of distributing education, research and campaign information. All information is kept private and confidential and stored in a secure location.