

SCC 2017 Registration

REGISTRATION INFORMATION

EMAIL

PASSWORD

5K or
HALF MARATON

PERSONAL INFORMATION

FIRST NAME

LAST NAME

DATE OF BIRTH

SEX

PHONE NUMBER

STREET ADDRESS

CITY

POSTAL CODE

COUNTRY

PROVINCE

EMERGENCY CONTACT NAME

EMERGENCY CONTACT NUMBER

MEDICAL CONDITIONS

SHIRT SIZE

BY CHECKING HERE YOU AGREE
TO THE SCOTIABANK
VANCOUVER WAIVER

FUNDRAISING PAGE INFORMATION

UNIQUE USERNAME

PASSWORD

FUNDRAISING GOAL