

Hello Supporters, Donors and Friends of the Father's Day Walk Run,

Prostate Cancer Foundation Canada is proud to present the 26th annual Father's Day Walk Run on Sunday, June 16th, 2024.

Sadly, 1 in 8 men in Canada will be diagnosed with it in their lifetime. Since 1997, Prostate Cancer Foundation Canada (formerly Prostate Cancer Foundation BC) has provided these men and their families access to resources and support, while raising awareness about the disease and providing crucial funding to prostate cancer research and survivorship programs throughout the province. We strive to make a difference in the lives of the men affected by prostate cancer in, but we need your help!

To support, encourage, and thank these individuals and groups who raise funds for PCFC, we offer prizes for the top collectors, as well as items that can be used for raffle & draw prizes.

We would like you to consider donating an item or gift card that we can use as a prize. With your help, we will be able to continue to show our appreciation to the hundreds of individuals and teams who put so much time and effort into fundraising for Prostate Cancer Foundation Canada, and hopefully encourage them to raise even more!

Thank you for your time and consideration.  
Sincerely,

*Nicole Sirockman*

Nicole Sirockman



**Prostate Cancer**  
Foundation Canada

[www.prostatecanada.ca](http://www.prostatecanada.ca)

**THE FATHER'S DAY**  
**WALK**  
**RUN**  
FOR PROSTATE CANCER

[www.thefathersdayrun.ca](http://www.thefathersdayrun.ca)

Want to do more?

Consider donating to our other Signature events:

- 15th Annual Ride to Live in May ([www.ridetolive.ca](http://www.ridetolive.ca))
- 3rd Annual Pars for Prostate event in September ([www.parsforprostate.ca](http://www.parsforprostate.ca))
- 4th Annual Virtual Silent Auction in November.

# Prize Donation Form

We thank you for donating a prize to The Father's Day Walk / Run. If there is an expiration date please have it expire no earlier than June 16th, 2025.

Company Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Postal Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Website \_\_\_\_\_

Description of item (please include the value and any restrictions of use):

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return the completed form by mail or email.

[nicole@prostatecanada.ca](mailto:nicole@prostatecanada.ca)

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