

Scotiabank Charity Challenge Registration: Step-by-Step Guide



Step 1: Open the following link: https://raceroster.com/events/2016/6372/banque-scotia-21k-de-montreal

Step 2: Click REGISTER on the right hand side of the page.

Confirm Registration	Registration Fees		
Canada Ru	21 km		Banque Scotia 21K de Montréal
Be the first of your friends	Nov 17-Jan 26	CA\$75.00	REGISTER
to like this	Jan 27 - Feb 29	Current Price CA\$80.00	BUY AS A GIFT
	Mar 1 - Apr 17	CA\$85.00	
Canada Running Series			Sun, April 24, 2016 08:00 AM EDT
2 mins	5 km		 Parc Jean-Drapeau, Montréal,
Canada Running Series	Nov 17 Jan 26	CA\$40.00	QC, Canada
Stay on top of all the	Jap 27 Eab 20	0	🕥 🛛 Visit Website 🖾

Step 3: You will need to create an account with Race Roaster in order to register for the race. You can either make an account using your e-mail address, or by logging in with your Facebook account.

Latte Cat Charteral	
Let's Get Started	
What is your email address?	
Email Address	
Do you have a Race Roster password?	
Ø No, I want to create a password.	
Yes, I have a password.	
Enter Password	
Forgat password?	
SIGN IN	
f Or Log in with Eacebook	
	Let's Get Started What is your email address? <u>Fmail Address</u> Do you have a Race Roster password? No, I want to create a password. No, I want to create a password. No, I want to create a password. Forgot password? SIGN IN Or Log in with Facebook

Step 4: Complete all the required personal information (marked by an asterisk). In this step, you will need to select whether you are running the 5k, the 5k with a stroller, or the half-marathon (21k). Once you have completed the form, click CONTINUE TO WAIVER.

If you would like to sign up more than one participant, click ADD ANOTHER PARTICIPANT. Once you have entered each additional participant's personal information, click CONTINUE TO WAIVER.

Participant #1 Registration Information I would like to register: Myself Someone Else First Name Date of Birth <tr< th=""><th>Name</th><th></th><th></th></tr<>	Name		
Registration Information Iwould like to register: Myself Someone Else • First Name • Last I • Date of Birth • Sex III YYYY-MM-DD • Email • Phone youremail@example.com • S5 Smith St.	Name		
Registration Information I would like to register: Myself Someone Else • First Name • Last I • Date of Birth • Date of Birth • Sex III YYYY-MM-DD • Email • Phon youremail@example.com • S5 Smith St.	Name		
I would like to register: Myself Someone Else First Name Last I Date of Birth Sex Fer YYYY-MM-DD Fer Email Phon youremail@example.com 555-3 Address S5 Smith St.	Name		
Myself Someone Else • First Name • Last 1 • Date of Birth • Sex • Date of Birth • Sex • Email • Phono • Email • Phono youremail@example.com • 555-1 • Address • S55 Smith St. • City • 2IP/P	Name		
First Name Last I Last I Date of Birth Sex Fer YYYY-MM-DD Fer Email Phon youremail@example.com S55-3 Address S5 Smith St. City City City	Name		
Date of Birth Sex Fer YYYY-MM-DD Fer Email Phon youremail@example.com S55-: Address S5 Smith St. City City TIP/Pi			
Date of Birth Sex Fer YYYY-MM-DD Fer Email Phon youremail@example.com S55-3 Address S5 Smith St. City City TIP/Pi			
Date of Birth Sex Fer YYYY-MM-DD Fen Email Phon youremail@example.com S55 Address S5 Smith St. City City TIP/Pi			
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Email Phon youremail@example.com S55- Address S5 Smith St. City City	nale		•
youremail@example.com 555- • Address 55 Smith St. • City • ZIP/P	e Number		
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S5 Smith St. Sity ZIP/P			
• City • ZIP/P		 	
• City • ZIP/P		 	
	ostal Code		
Country State	/Province		
Canada 🔻 Que	abec		۲
Callert Durat for Darticipant 1			
 21 km (CA\$75.00) 5 km (CA\$40.00) 			
 5 km with a stroller (CA\$50.00) 			
Additional Questions			
What is your Estimated Finishing Time (HH:MM:SS):			
Emergency Contact Name:			
Emergency Contact Number:			

				I	
Will you be participating	with any of the following:]
I will be participating	ing with a guide				
Nordic Poles	ing with a golde				
Recreational What	alchair				
	encirali				
 I would like to receive r 	ewsletters from the Canada	a Running Series:			
Select					v
How did you learn abou	it this event?				
Select					•
Please specify:					
What is your inspiration t	o run/walk?				
 Are you a Media Challe 	nge Participant?				
Select					•
Swag & Merchandise	2				
Souvenir Shirt					
Select	•				
iTab Medal Engraving	g - Personalize your Fini	sher's Medal! OPTIONAL			
CA\$12.00					
Once you've crossed the name and finish time ar	e finish line, sit back and re id shipped to your address	lax. Your iTaB will be engrav 5. Every Race Tells a Story.	ed with your		
N					
No					
Enter Promo Code					
Enter Promo Code					

Step 5: Read through and check off the release waiver, then click CONTINUE.



Step 6: Indicate whether or not you are currently a Scotiabank Employee by clicking YES or NO.

X RACE ROSTER	< Event Details			1-855-969-5515	Contact	Sign Out Menu 🗏	
	X	ALON THE	et 5k				
	Event Details > Register > Wai	ver > <mark>Scotiabank Emplo</mark> y	vee Verification > Scotiaba	nk Charity Challenge	 Checkout 		
		Scotiabank Emp	loyee Verificatio	n			
		Are you a Scoti	abank Employee?				
		YES	NO				

Step 7: Indicate that you would like to participate in the Scotiabank Charity Challenge by clicking YES.



Step 8: Registering for the Charity Challenge (please see next page)

- Under the header *Choose a Charity* select "Montreal Neurological Institute and Hospital (The Neuro)" from the drop down menu.
- Under the header *Charity Pin Code*, enter code 16MNEURO5k if you are completing the 5k, 16MNEURO21k if you are completing the 21k or 16MNEURO5p if you are completing the 5k with a stroller.
- Under the header *I would like to create a fundraising account or make a donation,* select "Create Scotiabank Charity Challenge Fundraising Account (via Fronstream)".
- Under the header *Create Scotiabank Charity Challenge Fundraising Account (via) FronStream)* enter a username and password. These credentials will be used to sign into your fundraising account once you have completed your registration.
- At this stage, you have the option to enter a fundraising goal or make a donation.
- Once you have completed all the necessary fields, click CONTINUE TO PAYMENT.

RACE ROSTER	< Event Details		1-855-969-5515	Contact	Sign Out	Menu =
Choose a Charity						
Please select the charity yo	u would like to support:					
Montreal Neurological Ir	stitute and Hospital (The Neuro) •					
Charity Pin Code (if app	licable)					
Your Charity Pin Code						
16MNEURO5k or 1	6MNEURO21k or 16MNEURO5p					
If you want more informati access to discount rates, bu	on on the PIN code or if your code doesn't work, please co It it is not mandatory.	ontact the selected charity	before completing	this form. This	s code gives you	
I would like to create a	fundraising account or make a donation					
Create Scotiabank Charit	y Challenge Fundraising Account (via FrontStream) 🔹					
Create Scotiabank Char	ity Challenge Fundraising Account (via FrontStream)					
Preferred FrontStream Use	rname					
CHECK AVAILABILITY						
FrontStream Password						
Fundraising Goal (optio	nal)					
CA\$ 0						
Donate (optional)						
Please enter the donation	amount					
This donation will be processed	separately by FrontStream.					
CA\$ 0						
This donation will appear o	n your personal fundraising page and it will help you to re	each your fundraising goal.				

CONTINUE TO PAYMENT

Step 9: An order summary of your registration can be found on the right hand side of the page. If everything is in order, enter your billing and payment information. Once you have completed all the necessary fields, click SUBMIT ORDER.

Billing Information		Order Details	
Copy from participant		Banque Scotia 21K de M Parc Jean-Drapeau, Montréal, C	ontréal)C, Canada
Select		▼ Participant #1	
First Name	Last Name	Name	
First Name	Last Name	REGISTRATION & ADD-ONS	
Email Address	Phone Number	Registration Fee + Souvenir Shirt - womens m	CA\$40.00 CA\$0.00
youremail@example.com	555-555-5555	Registration & Add-On Sub-total	CA\$40.00
Address		PARTICIPANT TOTAL	CAS40.00
59. Smith St.		Order Summary	ę.
City	ZIP/Postal Code	Registration Total GST	CA\$40.00 CA\$2.00
City	ZIP/Postal Code	Total Due (CAD)	CA\$46.15
Country	State/Drovince		
Canada	Quebec	•	
Please send me updates o Payment Information Credit Card Number	n event promotions and news from Race Roster. Credit Card Type		
	Select		
Expiration Date	CSC (What's This?)		
01 🔻 2016	▼ Qdigie		

The registration process is now complete.

After you have finished the registration process, you should immediately receive two e-mails:

- 1) A confirmation e-mail from RaceRoaster for your registration to the race (which will include your Invoice Number and your Participant Number) and;
- 2) A confirmation from FrontStream that your fundraising page has been created.

Do not delete either of these e-mails.

If you need assistance completing the registration process or have any questions regarding the registration process, please contact us at 514-398-5785 or by e-mail at <u>charityrun.neuro@mcgill.ca</u>.

THANK YOU FOR YOUR SUPPORT OF THE NEURO!