

## **REGISTERING FOR PURPLESTRIDE**

To register for PurpleStride, click on the "REGISTER" button on the top of the event website.



Government Affairs & Advocacy Office | 1050 Connecticut Ave. NW, 10th Floor | Washington, DC 20036 | Ph: 202-742-6699 | Fax: 202-742-6518 @2014 Pancreatic Cancer Action Network. PANCAN®, PURPLESTRIDE®, PURPLERIDE®, PURPLEBOWL® and PANCREATIC CANCER ACTION NETWORK® are registered trademarks.

## **START A TEAM**

To start a new team of which you will be the team captain, select the "Start a Team" button and enter the following information:



Next, you will be prompted to create a username and password.



Note: If you have participated in past Pancreatic Cancer Action Network events, you can use the same login and password. Click "click here" to use this login information.

> To create a username and password, fill in the form. Please note that usernames must be unique not only to PurpleStride users, but also for all participants in any event for any organization using the Blackbaud Sphere system. If your username is not accepted, click the "click here for more information" link for a helpful document with username suggestions.

> You may also use your login information from Google, Yahoo, Facebook, or Twitter to register for PurpleStride. However, the Pancreatic Cancer Action Network will not be able to assist in password reset or account troubleshooting if you register using one of these options.

### PANCREATIC CANCER ACTION NETWORK® PURPLESTRIDE

Ν	THE	CONTA	CT I	NFORMATION
SEC1	rion,	ENTER	THE	FOLLOWING
REQI	<b>JIRED I</b>	NFORMA	TION:	

### First Name

Last Name

### Email Address

We strongly suggest using each person's individual email address. If more than one person is registered using the same email, it will be harder for the Pancreatic Cancer Action Network to troubleshoot accounts, and the email address in question will receive multiple copies of each event email.

### Mailing Address

### **Birth Date**

is used by the Pancreatic demographic

	please make a selection 💌	
First Name: *		
Middle Initial:		
Last Name: *		
Email: *		
Address Line 1: *		
City: *		
State: *	Illinois 🔹	
ZIP/Postal Code: *		
		-
Birth Date: * (mm/dd/yyyy)		
Gender:	© © Male Female <sup>©</sup> Male	
I am a pancreatic cancer patient/survivor:	Yes	
I am a caregiver/family member/friend:	Yes	
l am a healthcare professional:	Yes	
Employer (optional – for demographic purposes only):		

#### Want to create custom fundraising webpage links?

If you would like a personalized link for your personal and team web pages, you must create both now. If you do not, you will still receive these fundraising pages but they will have long, hard-to-remember URLs.

These links cannot be edited later. NOTE: These links can ONLY contain letters, numbers, and underscore. If you receive an error message, make sure to remove all spaces and punctuation.

Personal Page	http://purplestride.kintera.org
link:	/chicago2013/
Team Page link:	http://purplestride.kintera.org /chicago2013/

In the Webpage Link section, create a custom friendly URL for both webpage Link section, create a custom mendly ORL for both your personal fundraising page and your team's fundraising page. Keep in mind, your links can only include letters, numbers, and an underscore (\_). In the example to the right, if you would like your personal page link to be http://purplestride.kintera.org/chicago2013/johndoe you would enter johndoe in the space provided.

### Registration Type

Adult Timed: \$30.00

- (5K)
- Adult Untimed: \$25.00 (5K, Fun Run/Walk)  $\bigcirc$
- Youth Timed: \$15.00 (5K)
- Youth Untimed: \$10.00
- (5K, Fun Run/Walk) Survivor: No Fee
- Pancreatic cancer survivors can attend the event at no charge
- Volunteer: No Fee  $\bigcirc$ Sign up to volunteer at the event and register for free!
- \*Currency shown: US Dollar

T-shirt Size

Size:

Please select a fee first V

In the Registration Type section, select your registration type and T-shirt size. (You must select your registration type before you can select your T-shirt size.)

Please note: not all PurpleStrides will have the registration types

	Discount	Clic	k here for help ?	
	If you have received	a discount code, please enter it here:		If you have received a
				discount code for you
	Add a Danation		k bara far bala 🔊	registration, enter it in
/ou would like to make a mation (in addition to your gistration fee), enter the amoun	Add a Donation You can start work to your registration of the registration p	Clic ing towards your personal fundraising goal by add fee. This is an additional amount that will be cha roccess.	there for help [?] ding a donation rged at the end	space provided in the Discount Code section
the Add a Donation section.		\$		
ur personal fundraising page		*Currency shown: US Dollar		
d will count towards your	Fundraising Goal		k here for help <b>?</b>	
rsonal fundraising goal and ur team's fundraising goal.	Ve encourage you You can do it all or can help you reach fundraising goal!	to collect donations from your colleagues, friend: line in your My HQ. Set your fundraising goal her your goal. TIP! Do not use a comma when en	s and family. re so that they ntering your	
	Amount:	\$ 100		
	Additional Inform	ation		
	In case of emergen	cy, please provide the name and number of a trus	sted person we	
Please fill in required	Emergency			
fields that are marked	Contact Name: *			
with a red asterisk	Emergency Contact Phone			
	Number: *			
	Why did you choose to		_	
	participate in this	please make a selection	•	
	How did vou hear			
	about this	please make a selection	•	
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			Card Holder Name: *	
			Credit Card Number:	
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			Name: *	
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Enter your billing donation amoun After you click "0 will see a confirm to the address y Please email eve	g information. You t will be displaye Continue," your re nation page and ou indicated on t ents@pancan.org	ur registration fee and any additional d under "Amount Due." egistration will be submitted and you will also receive a confirmation email he form.	Email: Address: * City: * State: Illinois Province: Zip/Postal Country: * United Phone	States



# **JOIN A TEAM**

To join a team, select the "Join a Team" button and do the following:



Next, you will be prompted to create a username and password.



### PANCREATIC CANCER ACTION NETWORK® PURPLESTRIDE

#### IN THE CONTACT INFORMATION SECTION, ENTER THE FOLLOWING **REQUIRED INFORMATION:**

### First Name

Last Name

### Email Address

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### Mailing Address

### **Birth Date**

is used by the Pancreatic **Cancer** Action

			tion 💌	
First Name: *				
Middle Initial:				
Last Name: *				
Email: *				
Address Line 1: *				
City: *				
State: *	Illinois		•	
ZIP/Postal Code: *				
				-
Birth Date: * (mm/dd/yyyy)				
Gender:	© Female	© Male		
I am a pancreatic cancer patient/survivor:	Yes			
I am a caregiver/family member/friend:	Yes			
l am a healthcare professional:	Yes			
Employer (optional – for demographic purposes only):				

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link:	/chicago2013/	

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- Pancreatic cancer survivors can attend the event at no charge Volunteer: No Fee  $\bigcirc$
- Sign up to volunteer at the event and register for free! \*Currency shown: US Dollar

T-shirt Size

Size:

Please select a fee first V

	Discount	Click	here for help ?	
	If you have received	a discount code, please enter it here:		If you have received a
				discount code for you
	Add a Danation	Clink	hara far haln 🕥	registration, enter it in
you would like to make a onation (in addition to your gistration fee), enter the amoun	Add a Donation You can start work to your registration of the registration of	CUCK ing towards your personal fundraising goal by addi fee. This is an additional amount that will be charg roccess.	nere for help ? ng a donation ged at the end	space provided in the Discount Code sectio
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ur personal fundraising page	Antoent.	*Currency shown: US Dollar		
d will count towards your	Fundraising Goal		here for help ?	
rsonal fundraising goal and ur team's fundraising goal.	We encourage you You can do it all or can help you reach <b>fundraising goal!</b>	to collect donations from your colleagues, friends line in your My HQ. Set your fundraising goal here your goal. TIP! Do not use a comma when ent	and family. e so that they e <b>ring your</b>	
	Amount:	\$ 100		
	Additional Inform	ation		
	In case of emergen	cy, please provide the name and number of a trust	ed person we	
Please fill in required	Emergency			
fields that are marked	Contact Name: *			
with a red asterisk	Emergency Contact Phone			
	Number: *			
	Why did you choose to			
	participate in this	please make a selection	•	
	event ?: " How did you hear			
	about this	please make a selection	•	
		Continue	Billing Amount Due	
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			Credit Card N	umber: *
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Enter your billing donation amoun	g information. You t will be displaye	ur registration fee and any additional d under "Amount Due."	Billing Inform	If the billing information is the same check this b If not please fill out the information below:
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Enter your billing donation amoun After you click "0 will see a confirm to the address y	g information. You t will be displaye Continue," your re nation page and you ou indicated on t	ur registration fee and any additional d under "Amount Due." egistration will be submitted and you will also receive a confirmation email he form.	Billing Inform	If the billing information is the same check this billing information is the same check this bill for please fill out the information below:
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Enter your billing donation amoun After you click "0 will see a confirm to the address y Please email eve vicit the Eurodesi	g information. You t will be displaye Continue," your re nation page and ou indicated on t ents@pancan.org	ur registration fee and any additional d under "Amount Due." egistration will be submitted and you will also receive a confirmation email he form.	Billing Inform	If the billing information is the same check this billing information is the same check this billing information below:



## **JOIN AS AN INDIVIDUAL**

To join as an Individual - NOT a member of a team - select the "Join as an Individual" radio button.



Next, you will be prompted to create a username and password.

RETURNING PARTICE ANTS: <u>click here</u> to lo previous PurpleSin .	Note: If ye Network e Click "clic
*required information	
Use Sphere login	
Usemame: *	
Password (between 5 and 20 characters) *	
Re-Type password: *	
Security Question: * please make a selection •	
Security Answer: *	
Remember me	
Google YAHOO!	
Facebook twitter	
Linked in	

te: If you have participated in past Pancreatic Cancer Action twork events, you can use the same login and password. ick "click here" to use this login information.

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### Mailing Address

### **Birth Date**

is used by the Pancreatic **Cancer** Action

			tion 💌	
First Name: *				
Last Name: *				
Email: *				
Address Line 1: *				
City: *				
State: *	Illinois		-	
ZIP/Postal Code: *				
				-
Birth Date: * (mm/dd/yyyy)				
Gender:	© Female	Male		
I am a pancreatic cancer patient/survivor:	Yes			
I am a caregiver/family member/friend:	Yes			
l am a healthcare professional:	Yes			
Employer (optional – for demographic purposes only):				

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link:	/chicago2013/

In the Webpage Link section, create a custom friendly URL for your letters, numbers, and an underscore ( \_ ). In the example to the right, if you would like your personal page link to be

http://purplestride.kintera.org/chicago2013/johndoe you would enter johndoe in the space provided.

In the Registration Type section, select your registration type and T-shirt size. (You must select your registration type before you can select your T-shirt size.)

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### Registration Type

- Adult Timed: \$30.00 (5K)
- Adult Untimed: \$25.00 (5K, Fun Run/Walk)  $\bigcirc$
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- Sign up to volunteer at the event and register for free! \*Currency shown: US Dollar

T-shirt Size

Size:

Please select a fee first V

	Discount	<u> </u>	Click here for help ?	
	If you have received	I a discount code, please enter it here:		If you have received a
				discount code for your
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	Amount:	\$ 100		
	Additional Inform	ation		
	In case of emergen	icy, please provide the name and number of a t	rusted person we	
Please fill in required	Emergency			
with a red asterisk	Emergency			
	Contact Phone			
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	choose to	please make a selection	•	
	event?: *	P		
	How did you hear			
	about this	please make a selection	•	
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			Credit Card Type: *	Visa
			Condit Cond Evolution	December 2012
			Clean Card Expiration.	
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			If not plea	se fill out the information below:
			Name: *	
			Last name: *	
			Email:	
Enter your billing	g information. You	ur registration fee and any addition	al City: *	
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After you click " will see a confirr to the address y Please email ev visit the Fundrais	nation page and ou indicated on t ents@pancan.org sing Tools sectior	will also receive a commution ema he form. I with any questions, and be sure t n of the event website to learn how	Code: * Country: * United S Phone CO	tates



## **REGISTER MULTIPLE PEOPLE**

To register multiple people as part of a single transaction, select the "Register Multiple People" button. Please note that you will still have to complete the full registration form for each individual person. The full payment for each registrant will be collected the end of the process. *Important: This form assumes you have not yet registered and are the first registrant. If you have already registered for this event, please register each person individually, rather than using the "Register Multiple People" option.* 

If you want all	Start a Team	
registrants to be added to a new team,	Start a Team, become a Team Captain and help collect donations from friends and family.	
with you as Team	◎ Join a Team	
Captain. Create a team	Join an existing Team and help collect donations from friends and family.	
name, then complete	◎ Join as an Individual	If you want to add all
the registration form	Register as an individual participant, not linked to a Team, and help collect donations from friends and family.	yourself, to an existing
If you want all regis to be independent registered. In this of there will be no association betwee these records. Sim complete the regis form for each perso	strants y case, ply tration on.	team. Select your team, then complete the registration form for each person.

Next, you will be prompted to create a username and password.

RETURNING PARTIC ANTS: previous Purple Striv	<u>click here</u> to lo		Note: If yo Network e Click "clicl
*required information			
	ate your username and		
Use Sphere login			
Username: *			
Password (between 5 and 20 characters)*			
Re-Type password: *			
Security Question: *	please make a selection	on 🔻	
Security Answer: *			
	Remember me		
Goo	gle YAHOO!	L	
<b>F</b> ac	ebook <b>twitter</b>		
	Linked in		

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When registering multiple people, you will complete the full registration form for each individual you are registering. Each person will receive a confirmation email with a username and instructions on how to create a password to access their HQ. For this reason, it is important that you enter each person's email address when completing their respective registration form.

Additionally, it is important that you register yourself as the first person; this is the email address the receipt will be sent to.

#### THE CONTACT **INFORMATION** Ν ENTER THE FOLLOWING SECTION, **REQUIRED INFORMATION:**

First Name

Last Name

### **Email Address**

We strongly suggest using each person's individual email address. If more than one person is registered using the same email, it will be harder for the Pancreatic Cancer Action Network to troubleshoot accounts, and the email address in question will receive multiple copies of each event email.

### Mailing Address

### Birth Date

This information is used by the Pancreatic Cancer Action Network for demographic purposes only.

	please make a selection 💌	
First Name: *		
Last Name: *		
Email: *		
Address Line 1: *		
City: *		
State: *	Illinois 🗨	
ZIP/Postal Code: *		
		-
Birth Date: * (mm/dd/yyyy)		
Gender:	© © Male Female © Male	
l am a pancreatic cancer patient/survivor:	Yes	
I am a caregiver/family member/friend:	Yes	
l am a healthcare professional:	Tes Yes	
Employer (optional – for demographic purposes only):		

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Size:

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### PANCREATIC CANCER ACTION NETWORK® URPLESTRIDE

