



## Application to Conduct a **BCAN Walk to End Bladder Cancer Event in Your City**

The **BCAN Walks** are volunteer run events. Dedicated Chairs generously donate their time and energy to recruit local volunteers to assist with event planning and coordination. ***We recommend that new Walks be located at least 60 miles or a 1.5-hour drive from a currently already established, active Walk site.*** New walks have a fundraising goal of \$5,000. The BCAN Walks are held annually mid-April through the end of June, with a concentration during May for Bladder Cancer Awareness Month.

If you are interested in organizing a **BCAN Walk to End Bladder Cancer** event to benefit the Bladder Cancer Advocacy Network (BCAN) in your city, please complete the following form and email to [walk@bcan.org](mailto:walk@bcan.org) for consideration.

1. Have you previously participated in a walk event for BCAN?  Yes  No  
*If no, have you participated in a walk event for a different organization?*  Yes  No  
*What organization:* \_\_\_\_\_ *Date:* \_\_\_\_\_  
  
*Location:* \_\_\_\_\_ *Date:* \_\_\_\_\_  
  
*Amount raised? \$* \_\_\_\_\_ *# of people you recruited to participate:* \_\_\_\_\_  
  
*Amount raised by the team: \$* \_\_\_\_\_

2. Please describe your plans for recruiting people to attend your walk.  
\_\_\_\_\_  
\_\_\_\_\_

3. Please describe how you would recruit volunteers/committee members to help with the event. Volunteers are needed to handle logistics, program, media/PR, sponsorship, etc. (BCAN Staff can support you with recruitment as well).  
\_\_\_\_\_  
\_\_\_\_\_

4. Please list potential sponsors in your area that you are willing to approach for support.  
\_\_\_\_\_  
\_\_\_\_\_

5. What is the potential walk location and walk date?  
\_\_\_\_\_  
*Location (Including city and state)* \_\_\_\_\_ *Date (Month/Year)* \_\_\_\_\_

6. Is a permit required?  Yes  No If so, what is the cost? \$ \_\_\_\_\_

7. Please list any urologists/medical professionals in your area who may be willing to participate?  
\_\_\_\_\_  
\_\_\_\_\_

Name of Potential Walk Organizer \_\_\_\_\_ Date \_\_\_\_\_

*Thank you for your interest in helping BCAN raise awareness as we pursue a cure for bladder cancer!*