

Official Pledge Sheet

Participant's Name: _____ Phone: _____

Address: _____

Sponsor's Name	Full Address	Postal Code	Amount Pledged	Receipt?*
1) _____	_____	_____	\$ _____	<input type="checkbox"/>
2) _____	_____	_____	\$ _____	<input type="checkbox"/>
3) _____	_____	_____	\$ _____	<input type="checkbox"/>
4) _____	_____	_____	\$ _____	<input type="checkbox"/>
5) _____	_____	_____	\$ _____	<input type="checkbox"/>
6) _____	_____	_____	\$ _____	<input type="checkbox"/>
7) _____	_____	_____	\$ _____	<input type="checkbox"/>
8) _____	_____	_____	\$ _____	<input type="checkbox"/>
9) _____	_____	_____	\$ _____	<input type="checkbox"/>
10) _____	_____	_____	\$ _____	<input type="checkbox"/>
11) _____	_____	_____	\$ _____	<input type="checkbox"/>
12) _____	_____	_____	\$ _____	<input type="checkbox"/>
13) _____	_____	_____	\$ _____	<input type="checkbox"/>
14) _____	_____	_____	\$ _____	<input type="checkbox"/>
15) _____	_____	_____	\$ _____	<input type="checkbox"/>
16) _____	_____	_____	\$ _____	<input type="checkbox"/>
17) _____	_____	_____	\$ _____	<input type="checkbox"/>
18) _____	_____	_____	\$ _____	<input type="checkbox"/>
19) _____	_____	_____	\$ _____	<input type="checkbox"/>
20) _____	_____	_____	\$ _____	<input type="checkbox"/>

Total Pledged: \$ _____

*For pledges of \$25.00 or more a tax receipt will be issued if requested above.

IMPORTANT – Pledge money must be received on or before event day in the following ways:

- 1) Drop it off at the St. John Ambulance office on 250 Gage Avenue, Kitchener.
- 2) Bring it with you when you pick up your runners kit.
- 3) Entry fees will be waived for *individuals* if pledges equal \$100 or more. ***Not applicable to Marathon Relay participants.***