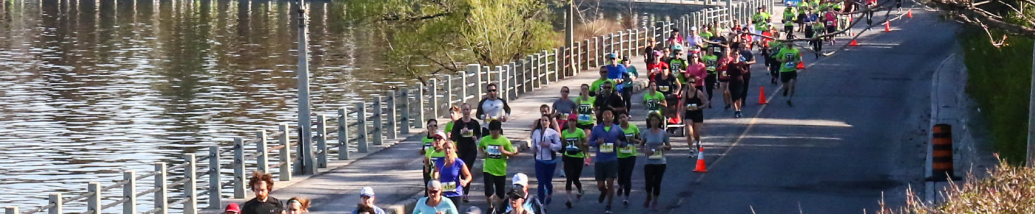




# SPORTING LIFE 10K PLEDGE FORM



## FUNDRAISER INFORMATION

Participant Name: \_\_\_\_\_ Team Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Email: \_\_\_\_\_  
 City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

**MY FUNDRAISING GOAL IS:**

## DONOR INFORMATION (Please Print Clearly)

Charitable Business: 13111 6022 RR 0001

					Amt Received	Receipt	
1	Name:			Method of Donation:			
	Address:			Cash      Cheque      CC			
	City:	Province:	Postal Code:	Credit Card Number:			
	Email:		Phone Number:	Expiry Date:			
				Signature:			
2	Name:			Method of Donation:			
	Address:			Cash      Cheque      CC			
	City:	Province:	Postal Code:	Credit Card Number:			
	Email:		Phone Number:	Expiry Date:			
				Signature:			
3	Name:			Method of Donation:			
	Address:			Cash      Cheque      CC			
	City:	Province:	Postal Code:	Credit Card Number:			
	Email:		Phone Number:	Expiry Date:			
				Signature:			
4	Name:			Method of Donation:			
	Address:			Cash      Cheque      CC			
	City:	Province:	Postal Code:	Credit Card Number:			
	Email:		Phone Number:	Expiry Date:			
				Signature:			

**TOTAL** \$ \_\_\_\_\_



- Please note receipts are issued for donations over \$25
- Cheques can be made payable to Camp Oochigeas
- Pledge forms can be mailed to: Camp Oochigeas - 464 Bathurst Street, Toronto, ON M5T 2S6

Thank you for sending kids affected by childhood cancer to Camp Ooch.