



Location:

Walker Name:

Team Name:

PLEDGE FORM *

- THE DONOR'S **FULL ADDRESS** (INCLUDING POSTAL CODE) IS REQUIRED, OR TAX RECEIPTS WILL **NOT** BE ISSUED - PRINT CLEARLY
- DONATIONS **LESS THAN \$20** WILL NOT BE RECEIPTED
- CHEQUES ARE PAYABLE TO **COLDEST NIGHT OF THE YEAR**, WITH THE NAME OF THE WALKER/TEAM ON THE MEMO LINE.

				AMOUNT
Donor Name:	Tel: ()	Email:		
Address:	Floor/Apt#:	City:	Postal Code:	
Donor Name:	Tel: ()	Email:		
Address:	Floor/Apt#:	City:	Postal Code:	
Donor Name:	Tel: ()	Email:		
Address:	Floor/Apt#:	City:	Postal Code:	
Donor Name:	Tel: ()	Email:		
Address:	Floor/Apt#:	City:	Postal Code:	
Donor Name:	Tel: ()	Email:		
Address:	Floor/Apt#:	City:	Postal Code:	
Donor Name:	Tel: ()	Email:		
Address:	Floor/Apt#:	City:	Postal Code:	
Donor Name:	Tel: ()	Email:		
Address:	Floor/Apt#:	City:	Postal Code:	
Donor Name:	Tel: ()	Email:		
Address:	Floor/Apt#:	City:	Postal Code:	
Donor Name:	Tel: ()	Email:		
Address:	Floor/Apt#:	City:	Postal Code:	
Donor Name:	Tel: ()	Email:		
Address:	Floor/Apt#:	City:	Postal Code:	



International Teams Canada: www.iteams.ca
 Charitable Registration #12659 9919 RR0001
 1 Union St. Elmira, ON, N3B 3J9
 Toll Free: 1.877.743.3413 | Tel: 519.669.8844
Blue Sea Philanthropy: www.blueseaphilanthropy.org

TOTAL \$ COLLECTED ON THIS SHEET:

THIS PAGE IS #: