



# PLEDGE FORM 2009

## Participant Information Required

LAST NAME		
FIRST NAME		
ADDRESS		
CITY	PROV	POSTAL CODE
TELEPHONE	EMAIL	

**PLEDGES** - Please print clearly and include full mailing address including postal code.  
If the information is incomplete, a tax receipt will NOT be issued.

NAME	ADDRESS (include street address, city, province and postal code)	Cash/Cheque Total
		\$
<b>GRAND TOTAL</b>		

Page \_\_\_\_\_ of \_\_\_\_\_ pages

Copy this page if you need more space or download one at [www.rebeccarun.com](http://www.rebeccarun.com).  
A minimum donation of \$15.00 is required to receive a charitable tax receipt.  
Registered charity # 86135 1922 RR0001