

2024 Pledge Form



Saturday, May 11th, 2024

| I am Hiking in Memory Of: | | | | I am Hiking in Honour Of: | | |
|------------------------------|-----------------|-----------------|----------------------|---------------------------|---------------|----------------------|
| Participant Name | | Mailing Address | | Phone Number | Email Address | |
| I am part of a team/business | | | Team Captain's Name: | Team Name: | | |
| Donor Name | Mailing Address | Phone Number | Email Address | Pledge Amount | Paid (Y/N) | Tax Receipt Required |
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| | | | | \$ | | |
| Pledge Total (this page): | | | | \$ | | |

***IMPORTANT:** Charitable tax receipts will be issued for all donations of \$20.00 or greater. To receive a tax receipt, full name, email and mailing address (including postal code) must be provided. Please note that all tax receipts will be emailed.

Need another pledge sheet? Awesome! Download a form from our website: www.huronshoreshospice.ca/hike-for-hospice