

## PARTICIPANT & EVENT INFORMATION:

Event Name:

First Name:

Last Name:

Address:

City:

Province:

Postal Code:

Telephone:

Email:

Please send this pledge form in to Attn: Mirela Prime, 600-890 W Pender St, Vancouver, BC V6C 1J9. Please do not put cash in the mail.

If you have cash donations, please personally write us a cheque payable to Parkinson Society BC for the total cash amount, with your donors listed below.

Donations of \$20 or more will be tax receipted unless otherwise indicated on the sheet. If the information is incomplete no tax receipt will be issued.

Donor Last Name	Donor First Name	Address	City	Prov	Postal Code	Telephone	Email	Amount Pledged	Payment Type: Cash/Cheque
Smith	John	123 Example Rd	Victoria	BC	V90 3E5	250-123-4567	johnsmith@example.com	\$55.00	Cash

PAGE TOTAL:

# Champions for Parkinson's Pledge Form

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