

It's that time of year again! Thank you so much for participating in this exciting event!

Participant		Address:	
Age:	(if under 17)		
Parent Sign	ature:		

Pledges of \$15 or more are eligible for a tax receipt. It is important that each donor must include full name, address and postal code to be eligible for one.

NAME OF SPONSOR	SPONSOR ADDRESS IN FULL	PHONE	AMOUNT	CASH/CHQ
13 WIL 01 31 011331	S. S. GON ADDRESS IN FOLE	NUMBER	COLLECTED	OR ONLINE
	123 Alphabet BLVD, Niagara			
EXAMPLE: John Smith	Falls, ON L2! 4T6	123-456-7890	\$ 15.00	CASH
EXCHANGE SOME SIME	1 4113, 514 22. 116	123 130 7030	ψ 13.00	C/ (311

SPONSOR NAME	SPONSOR ADDRESS IN FULL	PHONE NUMBER	AMOUNT COLLECTED	CASH/CHQ OR ONLINE

SPONSOR NAME	SDONSOD ADDRESS IN THE	PHONE	AMOUNT	CASH/CHQ
SPUNSUK INAIVIE	SPONSOR ADDRESS IN FULL	NUMBER	COLLECTED	OR ONLINE

SPONSOR NAME	SPONSOR ADDRESS IN FULL	PHONE	AMOUNT	CASH/CHQ
		NUMBER	COLLECTED	OR ONLINE