



Pledge Form in support of Every Step Counts
 Sunday, April 29, 2012
 Walk/Run/Stroll/Skip
 or pledge online at CanadaHelps.org

contact: Gillie Easdon
 250.882.5261
 geasdon@CoolAid.org

					Amount Pledged	Paid (✓)
() FIRST NAME LAST NAME AREA CODE PHONE STREET ADDRESS CITY PROV POSTAL CODE EMAIL					CREDIT CARD NUMBER <input type="checkbox"/> VISA <input type="checkbox"/> Master Card <input type="checkbox"/> Cheque <input type="checkbox"/> Cash EXPIRY DATE M M / Y Y CSV	\$ _____
() FIRST NAME LAST NAME AREA CODE PHONE STREET ADDRESS CITY PROV POSTAL CODE EMAIL					CREDIT CARD NUMBER <input type="checkbox"/> VISA <input type="checkbox"/> Master Card <input type="checkbox"/> Cheque <input type="checkbox"/> Cash EXPIRY DATE M M / Y Y CSV	\$ _____
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Pledge Collector: _____
 Address: _____ City: _____ Prov: _____ Postal Code: _____
 Phone: (H) _____ Fax: _____ Email: _____ Website: _____

Sheet Totals	\$ _____	\$ _____
FOR OFFICE USE ONLY		Total \$ _____