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Pledge Form

Pledges are based on participation. Please print clearly.

Complete information (sponsor name, address, postal code and phone number) is required for receipt purposes. Tax receipts will be issued for pledges of \$15 or more. Photocopy this sheet as required for additional sponsors. Please make all cheques payable to: AKA, 20 Maud Street, Suite 100, Toronto, Ontario M5V 2M5 Please write the name of the event at the bottom of the cheque.

Participant Information

SAMPLE ONLY

First Name	Last Name
Mailing Address	Suite/Apt. No.
City	Postal Code/ZIP
Phone	Email Address

Sponsor's Information

Sponsor's Name	Address	City	Prov.	Postal Code	Telephone	Pledge Amount

Please accept my total pledge submission of \$ _____

Thank you for supporting The Canadian Foundation Walkathon.

Charitable Number 8888 7777 RR0000XX