

## Pledge Form

### Participant Information

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Postal Code: \_\_\_\_\_  
 Phone: (       ) \_\_\_\_\_

\*Place totals of all donations here:

TOTALS	
Zebra: \$	_____
+ 50+: \$	_____
<b>TOTAL: \$</b>	<b>_____</b>

Please make cheques payable to charitable organization of choice.  
 Charitable tax receipt available for all donations over \$10. Receipts to be mailed after the RunWild Marathon.  
 Zebra Child Protection Centre Charitable Registration #88146 1818 RR0001  
 St. Albert 50+ Club Charitable Registration #12465 8600 RR0001

Photocopy pledge form as required. **Please PRINT clearly.**  
**\*Please place total of all donations in the TOTALS box at the top of the page.**

### Pledge Information

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Donation Amount: \_\_\_\_\_ Cash ☐ Cheque ☐  
 Charitable Organization: Zebra Child Protection Centre ☐ St. Albert 50+Club ☐  
 Email: \_\_\_\_\_  
 Tax receipt required: Yes ☐ No ☐  
 Mailing address same as above: Yes ☐ No ☐  
 Mailing address if different than above: \_\_\_\_\_

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