

Virtual Hike for Hospice Calgary PLEDGE FORM

Name of Hiker _____

Address _____

City/Province _____ Postal Code _____ Phone _____

E-Mail Address _____

Team: _____

(Please PRINT clearly, and use additional sheets as required)

Pledge Process:

- Collect the cash or cheque when your donor agrees to contribute. DON'T mail cash.
- Ensure cheques are made payable to Hospice Calgary.
- Drop off your pledge form and funds at our office before the Hike: 1245 – 70 Avenue S.E., Phone 403-263-4525
- **Charitable tax receipts will be issued for all donations \$20.00 and over**

Under 16? Y / N	Donor's Name <small>(Please include Mr, Ms. or Mrs.)</small>	Donor's Mailing Address <small>(including city, province & postal code)</small>	Email Address	Amt Donated	Cash / Cheque
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
Donors under the age of 16 will not receive tax receipts. Please provide a legal guardian's info if tax receipt is required. Charitable Registration #118963669 RR0001			Total Pledges This Page	\$	

Hospice Calgary does not sell, lease or otherwise share mailing lists.