

SPORTING LIFE 10K

FUNDRAISER INFORMATION					MY FUNDRAISING GOAL IS:	
Participant Name:				Email:		
City	y:	Province:	Postal Code:	Telephone:		
D	ONOR INFORM	IATION (Please Pr	rint Clearly)	Charitable Business: 13111 6022 RR 0001	Receipt	
1	Name: Address:			Method of Donation: Cash Cheque CC		
	City:	Province:	Postal Code:	Credit Card Number: Expiry Date:		
	Email:	Phor	ne Number:	Signature:		
2	Name: Address:			Method of Donation: Cash Cheque CC Credit Card Number:		
	City:	Province:	Postal Code:	Expiry Date:		
	Email:	Phor	ne Number:	Signature:		
3	Name: Address:			Method of Donation: Cash Cheque CC		
			Darkel Carlo	Credit Card Number:		
		Province:		Expiry Date:		
	Email:	Phor	ne Number:	Signature:		
4	Name:			Method of Donation: Cash Cheque CC		
	Address:			Credit Card Number:		
	City:	Province:	Postal Code:	Expiry Date:		
	Email: Phone Number:		ne Number:	Signature:		



- Please note receipts are issued for donations over \$25
 Cheques can be made payable to Campfire Circle
 Pledge forms can be mailed to: Campfire Circle 464 Bathurst Street, Toronto, ON M5T 2S6

TOTAL \$