18th Annual Hike for Hospice Pledge Form

HIKER'S NAME	ADDRESS				CHECK /	- CHECK APPLICABLE BOX:	
CITY	POSTAL CODE		PHONE		ADU	ADULT (18+)	
EMAIL	TEAM	TEAM NAME (IF APPLICABLE)			YOUTH (UNDER 18)		
My \$25 registration fee is enclose	ed My \$25 registration fee wa	s paid online					
Pledge form and monies raised sh of these days, please drop off you							
SPONSOR'S NAME	MAILING ADDRESS	CITY	POSTAL CODE	EMAIL	PHONE NUMBER	AMOUNT PLEDGED	Collected
							igspace
							L
							L
							L
							L
							$oxed{oxed}$
							$oxed{oxed}$
							$oxed{oxed}$
							L
							L
							L
FOR PEOPLE WHO WISH TO SPONSOR YOU USING A CREDIT CARD					CHEQUE TOTAL		
. Visit our secure website <u>www.stedmanhike.ca</u> and click DONATE NOW 2. Select if you are donating to a Team or Individual					AMOUNT RAISED ONLINE		
3. Start typing the name of the Team or Individual you wish to donate to and select from the list displayed					TOTAL AMOUNT RAISED		