

PLEDGE SHEET

Use this form to collect pledges in-person or go to www.bustinloose.ca to register to collect pledges online, too!



NAME OF PARTICIPANT: _____

ADDRESS: _____

CITY: _____ POSTAL CODE: _____

TELEPHONE NUMBER(S): _____

CHEQUES MADE PAYABLE TO:
Bustin' Loose Race to End Breast Cancer

TAX RECEIPTS
Please note, tax receipts will only be issued for donations of \$20.00 or more.

| NAME OF DONOR (PLEASE PRINT) | ADDRESS | CITY | PROVINCE | POSTAL CODE | TELEPHONE NUMBER | PLEDGE AMOUNT | PAID | |
|---------------------------------|---------|------|----------|----------------|---------------------|------------------|------|--|
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| 14. | | | | | | | | |
| 15. | | | | | | | | |
| TOTAL | | | | | | | | |

REGISTER ONLINE OR BY MAIL
Shelley Acheson C/O Bustin' Loose
45 East Glen Dr SE
Medicine Hat, AB
T1B 2W1

VISIT US ONLINE AT:
WWW.BUSTINLOOSE.CA
Photo gallery, videos, race results, and more
Printable Pledge Sheets are also available online.

