



St. Patrick's Day Pledge Form



Thank you for helping raise funds for The Canadian Diabetes Association. Please make any cheques payable to **The Canadian Diabetes Association**. Completed pledge forms and pledges **must be handed in at race package pick up** to be eligible for prizes.

Prizes

Collect

\$250.00

\$500.00

\$750.00

And Receive

\$25.00 gift certificate to the Running Room

A Team Diabetes running singlet

Team Diabetes Running Jacket

Participant Information

Name: _____ Address: _____

City: _____ Postal Code: _____ Home Ph: _____

Work Ph: _____ Email: _____

If you require additional space please feel free to photocopy this form.

Tax receipts given for any donation over \$15.

First & Last Name	Address (Include City)	Postal Code	Phone	Amount	Paid	Credit Card & Signature
						Card Number & Expiry Signature
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Total Collected:

Prize Received:



**The Canadian
Diabetes Association**



PRIVACY POLICY: Personal information collected on this pledge form will not be given or sold to any other organization including event sponsors. This information will only be used for communication directly related to your pledge.