

# SPECIAL OLYMPICS ONTARIO PLEDGE FORM



**Participant Name** \_\_\_\_\_

**Event/Fundraiser** \_\_\_\_\_ **Tel** \_\_\_\_\_

**Email** \_\_\_\_\_

*We hope to raise funds for children and adults with an intellectual disability by providing year-round sport training and competition. I need your help. Will you please sponsor me by making a tax deductible donation to Special Olympics Ontario today? **Thank you!***

(Please Print)

| Donor Name | Address<br>(Street, City, Province, Postal Code) | Telephone/Email | Amount<br><small>(Please check payment method)</small> |                                 |
|------------|--|-----------------|--|---------------------------------|
|            |  | Tel: _____      | \$ .   |                                 |
|            |  | Email: _____    | Cash <input type="checkbox"/>                          | Cheque <input type="checkbox"/> |
|            |  | Tel: _____      | \$ .   |                                 |
|            |  | Email: _____    | Cash <input type="checkbox"/>                          | Cheque <input type="checkbox"/> |
|            |  | Tel: _____      | \$ .   |                                 |
|            |  | Email: _____    | Cash <input type="checkbox"/>                          | Cheque <input type="checkbox"/> |
|            |  | Tel: _____      | \$ .   |                                 |
|            |  | Email: _____    | Cash <input type="checkbox"/>                          | Cheque <input type="checkbox"/> |
|            |  | Tel: _____      | \$ .   |                                 |
|            |  | Email: _____    | Cash <input type="checkbox"/>                          | Cheque <input type="checkbox"/> |
|            |  | Tel: _____      | \$ .   |                                 |
|            |  | Email: _____    | Cash <input type="checkbox"/>                          | Cheque <input type="checkbox"/> |
|            |  | Tel: _____      | \$ .   |                                 |
|            |  | Email: _____    | Cash <input type="checkbox"/>                          | Cheque <input type="checkbox"/> |

\* Please make all cheques payable to: **Special Olympics Ontario**. Send along with pledge form(s) to: **Special Olympics Ontario, 18 Wynford Drive, Suite 300, Toronto, ON M3C 3S2**. Please do not send cash through the mail. Tax receipts will only be issued for donations \$20 or greater unless otherwise requested.

|                   |                     |                   |
|-------------------|---------------------|-------------------|
| <b>Cash: \$</b> . | <b>Cheques \$</b> . | <b>TOTAL \$</b> . |
|-------------------|---------------------|-------------------|