



Helping Kids with  
Physical Disabilities  
Succeed



# PLEDGE FORM



## BEACH VOLLEYBALL TOURNAMENT FOR EASTER SEALS KIDS SATURDAY, JULY 18, 2009



TEAM NAME: \_\_\_\_\_ PLAYER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ PROV: \_\_\_\_\_ PC: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

Sponsor's Name and Complete Address		Amount Pledge	PAID ✓	CASH / CHEQUE
<b>Tax receipts will be issued for all donations of \$10 or more. Please make all cheques payable to "Easter Seals Ontario". PLEASE PRINT CLEARLY - RECIEPTS WILL ONLY BE SENT WITH FULL ADDRESS AND POSTAL CODE.</b>		\$10.00	✓	CASH
Last name _____ First name _____				
Apt. #/TH/Suite	Street Address City Postal Code			
Last name _____ First name _____				
Apt. #/TH/Suite	Street Address City Postal Code			
Last name _____ First name _____				
Apt. #/TH/Suite	Street Address City Postal Code			
Last name _____ First name _____				
Apt. #/TH/Suite	Street Address City Postal Code			
Last name _____ First name _____				
Apt. #/TH/Suite	Street Address City Postal Code			

**Please return all pledges and payments to:  
Easter Seals Ontario  
Attn: Rebecca Pero  
304-863 Princess Street, Kingston, ON, K7L 5N4  
Or bring day-of tournament**