

2019 HIKE FOR HOSPICE PLEDGE FORM



Hiker's Name: _____

Hiker's Address: _____

Phone: _____ Email: _____

MY PLEDGE CHALLENGE:
\$100.00

1. Reach out to friends, family, neighbours or colleagues to help raise funds for Hospice Quinte.
2. Donors pledge a fixed amount, of their choice, towards your 2km or 5km walk/run on Hike Day.
3. Please make all cheques payable to *Hospice Quinte* and note *Hike For Hospice* in memo field.
4. Credit card pledges can be processed online at: HospiceQuinte.ca/2019-hike-for-hospice

Donations over \$10.00 are tax deductible and will receive a tax receipt. Questions? Please call, Lisa McMurter (613) 966-6610 ex. 221.

DONOR FIRST/LAST NAME:	DONOR MAILING ADDRESS:	DONOR PHONE:	PLEDGE AMOUNT:	PAID (CASH, CHQ, WEB):

TOTAL: _____

DONOR FIRST/LAST NAME:

DONOR MAILING ADDRESS:

DONOR PHONE:

**PLEDGE
AMOUNT:**

**PAID (CASH,
CHQ, WEB):**

DONOR FIRST/LAST NAME:	DONOR MAILING ADDRESS:	DONOR PHONE:	PLEDGE AMOUNT:	PAID (CASH, CHQ, WEB):

TOTAL: _____