

## PLEDGE FORM

Participant Name: \_\_\_\_\_ Team Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

PLEASE PRINT ALL INFORMATION CLEARLY – **CHEQUES ARE PAYABLE TO CEDARS CANCER FOUNDATION** RE: SPLASH & DASH  
A full tax receipt will be issued for all donations \$18 or more.

NAME	FULL ADDRESS (with postal code)	PLEDGE	CHEQUE OR CASH
<b>TOTAL</b>			

Please return your payment or address any inquiries to  
Wendy Lufty : wendy.lufty@cedarsevents.ca

**FONDS DE SARAH DES CÈDRES - FONDATION DU CANCER DES CÈDRES**  
**SARAH'S FUND FOR CEDARS - CEDARS CANCER FOUNDATION**  
1310, avenue Greene, Suite 520, Westmount, Québec H3Z 2B2  
T: (514) 656-6662 | F: (514) 303-1288 | cedars.ca  
No. ARC | CRA No. 105202501 RR 0001