



WALKER REGISTRATION

Please include personal information on ALL pledge forms submitted

Please print clearly in ink

First name:

Last name:

Address:

City:

Province:

Postal Code:

Telephone:

Email:

Team (if any):

Cash attached \$

Cheques attached + \$

Total attached = \$

Outstanding to be collected and submitted later + \$

➔ Total pledges = \$

Pledge form Page: of:

PLEDGE FORM

Please pay in advance. Make cheques payable to:	AIDS Calgary Awareness Association
Please bring your completed pledge form(s) and all money collected to the Walk or submit them to:	1603 10th Avenue SW, Unit 110, Calgary, AB T3C 0J7
All pledge forms and monies should be collected by:	October 7, 2011

1

➔ *Joanie Walker*
 First name: Last name: Address: *1 Red Ribbon Road*
Red Deer *AB*
 City: Province:

AB T2C3 *403.123.4567* *jwalker@notmail.ca*
 Postal Code: Telephone: Email:

➔ Amount \$ *XX.^{xx}* Tax receipt? Cash Cheque Paid?

Please check here if you do **NOT** want to be contacted by your local Walk organizer.

2

➔ First name: Last name: Address: City: Province:

Postal Code: Telephone: Email: ➔ Amount \$ Tax receipt? Cash Cheque Paid?

Please check here if you do **NOT** want to be contacted by your local Walk organizer.

3

➔ First name: Last name: Address: City: Province:

Postal Code: Telephone: Email: ➔ Amount \$ Tax receipt? Cash Cheque Paid?

Please check here if you do **NOT** want to be contacted by your local Walk organizer.

4

➔ First name: Last name: Address: City: Province:

Postal Code: Telephone: Email: ➔ Amount \$ Tax receipt? Cash Cheque Paid?

Please check here if you do **NOT** want to be contacted by your local Walk organizer.

5

➔ First name: Last name: Address: City: Province:

Postal Code: Telephone: Email: ➔ Amount \$ Tax receipt? Cash Cheque Paid?

Please check here if you do **NOT** want to be contacted by your local Walk organizer.

6

➔ First name: Last name: Address: City: Province:

Postal Code: Telephone: Email: ➔ Amount \$ Tax receipt? Cash Cheque Paid?

Please check here if you do **NOT** want to be contacted by your local Walk organizer.

7

➔ First name: Last name: Address: City: Province:

Postal Code: Telephone: Email: ➔ Amount \$ Tax receipt? Cash Cheque Paid?

Please check here if you do **NOT** want to be contacted by your local Walk organizer.

8

➔ First name: Last name: Address: City: Province:

Postal Code: Telephone: Email: ➔ Amount \$ Tax receipt? Cash Cheque Paid?

Please check here if you do **NOT** want to be contacted by your local Walk organizer.