



Pledge Prize Incentives

(Tax receipts provided for all donations over \$20 with complete contact information)

Raise **\$100** and participate for **FREE!**

Raise **\$500**, participate for FREE and receive a
\$100 gift certificate for Runners Den
 (Gift Certificate can be redeemed at the race and/or orders shipped to you)

Name: _____ Phone#: _____

Address: _____ City: _____

Province: _____ Postal: _____ E-mail: _____

Race Category: 1km 5km 10km 1/2 Marathon Marathon

Company/School/Organization: _____

1	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
2	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
3	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
4	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
5	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
6	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
7	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
8	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>

Total Pledges:

Please make all cheques payable to Road to Hope
PROCEEDS BENEFIT CITY KIDZ® & JOY & HOPE OF HAITI

9	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
10	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
11	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
12	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
13	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
14	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
15	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
16	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
17	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
18	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
19	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
20	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
21	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>
22	Name: _____ Phone#: _____ Pledge amount: _____ Address: _____ Postal Code: _____	Receipt <input type="checkbox"/>	Paid <input type="checkbox"/>

Total Pledges:

City Kidz Charitable Number 89498 2479 RR0001

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