THE ULTIMATE ADVENTURE - PLEDGE SHEET

Participant's Name: _____ **Team Name:** _____

First Name	Last Name	Street Address	City	Province	Postal Code	Phone	Pledge $	Paid?	Tax Receipt?

TOTAL DONATIONS _____

**Please make cheques payable to Halifax Transition House Association*
**Please use alternate form to pay via Visa or Mastercard or by calling the Administration Office at Bryony House - 429-9001*
** Tax receipts will be issued for donations of $10 or more and only if requested. Donor name and address must be legible*