Virtual Walk-Run-Roll 2019

Name: Team Name:

Address:

City: Prov: Postal:

Phone: Email:

Please Print Clearly - Tax receipts are automatically issued for pledges of $20 or more if donor information is legible and complete

Sponsor Name	Address	City, Prov.	Postal	Phone #	Pledge $	Paid
Example: Joe Smith	*121 Main Street*	*Anytown, ON*	*N3S 3F9*	*519-555-3456*	*$20*	*X*

Grand Total $

Subtotal (Page ___ of ___) $

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#defeatduchenne

Please make cheques payable to: **Jesse's Journey**
PO Box 51 Station B
London, ON N6A 4V3
519-645-8855
Registered Charity #: 89505-7756-RR0001

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