



# HIKE

*for hospice*

A FUNDRAISING EVENT IN SUPPORT OF  
ROTARY HOSPICE STRATFORD PERTH

Hiker's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

Team Name \_\_\_\_\_

Team Captain \_\_\_\_\_

**Please mail your completed pledge form and cheque to:**  
Rotary Hospice Stratford Perth  
80 Greenwood Drive, Stratford ON N5A 0J1

**Make all cheques payable to:** Stratford Perth Hospice Foundation.  
Please do not include online donations on this pledge form.  
Donations of \$20 or more will receive a Tax Receipt if name and full address are provided. Charitable Business Number: 72776 0126 RR0001.

<i>Please print clearly</i> <b>Sponsor Name</b>	<i>Tax receipts can be sent by email to help keep our costs low</i> <b>Email</b>	<i>Please print clearly</i> <b>Street Address, City, Province, Postal Code</b>	<b>Phone</b>	<i>Tax receipts will be issued for donations of \$20 or more</i>			<b>Paid</b>
				<b>Amount</b>	<b>Cash</b>	<b>Chq</b>	
Jane Doe	info@stratfordperthhospice.ca	80 Greenwood Drive, Stratford, ON, N5A 0J1	519-276-3322	25.00	-	X	X
<b>FOR OFFICE USE ONLY:</b>				<b>CASH TOTAL \$</b>	<b>CHEQUE TOTAL \$</b>		<b>PAGE TOTAL \$</b>
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