



# PLEDGE SHEET

**Thursday, May 21, 2020**

## Classic Bowl

3055 Dundas Street W., Mississauga

**INSTRUCTIONS:** Make cheques payable to Peel Children's Centre.

**RECEIPTS:** Will be issued for **donation of \$20** or more if requested. Donor's name and address must be completed and legible.

**BOWLERS:** Please include Team Name, Bowler's Name and hand in completed package at the event

Team Name: \_\_\_\_\_  
Bowler's Name: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Email: \_\_\_\_\_  
**\*\* FREE REGISTRATION for each bowler who raises \$125**

**OFFICE USE ONLY:**  
**TEAM #:** \_\_\_\_\_  
**LANE #:** \_\_\_\_\_

**PLEASE PRINT CLEARLY: Name, Address, Phone Number, Email Address, Pledge Amount**

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ P.C.: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Pledge Amount: \_\_\_\_\_ Paid: \_\_\_\_\_

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ P.C.: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Pledge Amount: \_\_\_\_\_ Paid: \_\_\_\_\_

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ P.C.: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Pledge Amount: \_\_\_\_\_ Paid: \_\_\_\_\_

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ P.C.: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Pledge Amount: \_\_\_\_\_ Paid: \_\_\_\_\_

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ P.C.: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Pledge Amount: \_\_\_\_\_ Paid: \_\_\_\_\_

**AMOUNT COLLECTED:**  
**CASH:** \_\_\_\_\_ **CHEQUES:** \_\_\_\_\_