

Polar Plunge for Special Olympics Pledge Form

Location: _____



ONTARIO LAW ENFORCEMENT
POLAR PLUNGE
FOR SPECIAL OLYMPICS ONTARIO

Participant Name _____

Address _____

Tel _____

Email _____

*I am participating in the Polar Plunge for Special Olympics! We are raising funds to help provide sports training and competition for children and adults with an intellectual disability. Will you please sponsor me by making a tax-deductible donation to Special Olympics Ontario? **Thank you!***

(PLEASE PRINT CLEARLY)

Donor Name	Address (Street, City, Province, Postal Code)	Telephone/Email	Amount (Please check payment method)	
		Tel:	\$.	
		Email:	Cash <input type="checkbox"/>	Cheque <input type="checkbox"/>
		Tel:	\$.	
		Email:	Cash <input type="checkbox"/>	Cheque <input type="checkbox"/>
		Tel:	\$.	
		Email:	Cash <input type="checkbox"/>	Cheque <input type="checkbox"/>
		Tel:	\$.	
		Email:	Cash <input type="checkbox"/>	Cheque <input type="checkbox"/>
		Tel:	\$.	
		Email:	Cash <input type="checkbox"/>	Cheque <input type="checkbox"/>

Please make all cheques payable to: **Special Olympics Ontario and hand in your pledge form at the registration table with all cash and cheques*

www.polarplunge.ca

Special Olympics Ontario Registered Charitable Number - 11906 8435 RR0001

(Continued Over)

Donor Name	Address (Street, City, Province, Postal Code)	Phone Number	Amount (Please check payment method)	
			\$.	
			Cash <input type="checkbox"/>	Cheque <input type="checkbox"/>
			\$.	
			Cash <input type="checkbox"/>	Cheque <input type="checkbox"/>
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			Cash <input type="checkbox"/>	Cheque <input type="checkbox"/>
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			Cash <input type="checkbox"/>	Cheque <input type="checkbox"/>
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			\$.	
			Cash <input type="checkbox"/>	Cheque <input type="checkbox"/>
			\$.	
			Cash <input type="checkbox"/>	Cheque <input type="checkbox"/>

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Cash: \$.	Cheques \$.	TOTAL \$.
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