



WESTLOCK MOTORCYCLE RIDE FOR STARS
 Sponsored by the Gold Wing Road Riders Association, Edmonton Chapter
Pledge Form

Name of Participant: _____
Daytime Telephone Number: _____

Persons pledging may request tax-deductible receipts for donations over \$20.00.

TO RECEIVE A RECEIPT, please **PRINT** accurate name, address and postal code below.

All pledges must be turned in at registration on **July 9, 2011**, prior to the event.

All pledge money must accompany this form.

Pledge Name (<i>Please print</i>)	Address	City	Postal Code	Daytime Phone #	Amount Pledged	Amount Enclosed	Receipt Required?
		TOTAL					

Total Pledged: (a) \$ _____

Total Enclosed: (b) \$ _____

(note: Amount (a) and (b) should be equal)

Participant's Signature: _____

Dated: _____