LMYC
SAIL FOR HOSPICE

the hospice of windsor. inc.

SEPTEMBER 7th, 2008

PLEDGE SHEET

the hospice of windsor. inc.

PARTICIPANTS NAME:_____
ADDRESS:_____
_____
BOAT NAME:_____
PHONE NUMBER:_____POSTAL CODE:_____

PLEASE PRINT NAME VERY CLEARLY
FOR TAX RECEIPT PURPOSES
(issued for pledges of $10.00 or more)

PLEASE HAND IN MONEY AND PLEDGE SHEETS BY SUNDAY, SEPTEMBER 7th, 2008
MAKE ADDITIONAL COPIES AS REQUIRED

NAME	ADDRESS, POSTAL CODE	PHONE #	PLEDGE

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