JOURNEY PLEDGE FORM

Participant's Name: _____

Address: _____

City/Town: _____

Postal Code: _____

This is my _____ year participating on the snowmobile ride.

Funds Received	Sponsor Name	Address & Postal Code	Receipt #	Pledge	Cash/Cheque

- Make cheques payable to the "Journey for Sight".
- Issue tax receipts for donations over $10.00
- Those requesting information about the Eye Bank or the Journey are asked to call **1-800-552-6820** or contact a local Lions club.
- Ride safe and thank you for raising funds for those in need.

Additional information: _____

_____

_____

TOTAL PLEDGES RAISED: $ _____

Please Complete:

Cheque **Total: $**	**Cash** **Total: $**
Receipted **Total: $**	**Non-Receipted** **Total: $**