



AMAZING RAISE 2017

SPONOSORSHIP FORM

Pledge Name	<hr/>		
Pledge Amount	<hr/>	Payment Type - Cash-Check Tax Receipt - Yes - No	Team House Team Barn Team MP Room
Address:	<hr/>		
Pledge Name	<hr/>		Team House Team Barn Team MP Room
Pledge Amount	<hr/>	Payment Type - Cash-Check Tax Receipt - Yes - No	Team MP Room
Address:	<hr/>		
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Pledge Amount	<hr/>	Payment Type - Cash-Check Tax Receipt - Yes - No	Team MP Room
Address:	<hr/>		

Total \$

Tax Receipt Issued for \$25 and over only

For further info email events@saintsrescue.ca