

## Swing Fore Camp

Virtual Golf Challenge in Support of Camp He Ho Ha

Pledge Form

\*All Donations MUST be submitted to Camp He Ho Ha by September 10, 2021\*

City:



Prov:

Participant Name: \_\_\_\_\_\_ Phone #: \_\_\_\_\_\_

Address:

Postal Code: Email:

Proceeds from this fundraiser will be used to support people with disabilities, allowing them to attend summer camp at Camp Health, Hope & Happiness. **Tax receipts are available for donations greater than \$20.** 

Sent to Camp	AMOUNT	Payment Method	Tax Receipt Requested	<b>DONOR INFORMATION</b> *If we can't read it, we can't receipt it.* Make cheques payable to Camp He Ho Ha.
€ Funds € Pledge Info	EX \$ <u>50.00</u> ✓Make this a monthly gift	AMPLE Cash	Mequesteed Yes (Must complete mailing address and e-mail) No	Name: Jane Example Smith Phone #: 555-123-4567   Address: 123 Your Street EXAMPLE City: Your City Prov: AB   Email: janesmith@example.com Postal Code: A1A 1A1   (Your email address is used to send a tax receipt, saving Camp He Ho Ha the cost of generating and mailing a receipt) Please print neatly. I do not consent to receive other electronic communications from Camp He Ho Ha.
□ Funds □ Pledge Info	\$ ☐ Make this a monthly gift	□Cash □Cheque	☐ Yes (Must complete mailing address and e-mail) ☐ No	Name: Phone #:   Address: City:   Prov: Prov:   Email: Postal Code:   (Your email address is used to send a tax receipt, saving Camp He Ho Ha the cost of generating and mailing a receipt)   Please print neatly. I do not consent to receive other electronic communications from Camp He Ho Ha.
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Total		Box 182, S	eba Beach, AB, 1	Camp Health, Hope & Happiness TOE 2B0   (780) 429-3277   Charitable Registration Number: 11882 7229 RR0001 Page of

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