

Shoot For Cause Fundraiser

in Support of Camp He Ho Ha

Pledge Form

Address: _____

Email:

MUST be submitted to Camp He Ho Ha by May 6, 2022*



Participant Name: _____ Phone #: _____

Prov:

Postal Code:

City: ___

*All Donations

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.

Received	AMOUNT	Payment Method	Tax Receipt Requested	DONOR INFORMATION *If we can't read it, we can't receipt it.* Make cheques payable to Camp He Ho Ha.
¥Funds Pledge Info Camp use only	EXAM \$50.00 Make this a monthly gift	PLE I I I I I Cheque	✓Yes (Must complete mailing address and e-mail) □No	Name: Jane Example Smith Phone #: 555-123-4567 Address: 123 Your Street EXAMPLE Phone #: 555-123-4567 City: Your City Prov: AB Email: janesmith@example.com Postal Code: A1A (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 Camp use only	\$ □Make this a monthly gift	□Cash □Cheque	□Yes (Must complete mailing address and e-mail) □No	Name: Phone #: Address: City: Email: Prov: (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 Camp use only	\$ □Make this a monthly gift	□Cash □Cheque	□Yes (Must complete mailing address and e-mail) □No	Name: Phone #: Address: City: Email: Prov: (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 Camp use only	\$ □Make this a monthly gift	□Cash □Cheque	□Yes (Must complete mailing address and e-mail) □No	Name: Phone #: Address: City: 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.
Total		Box 182, 1		, TOE 2B0 (780) 429-3277 Charitable Registration Number: 11882 7229 RR0001 Contact Greg Nielsen greg@camphehoha.com 780-429-3277 ext. 222 Page of

	AMOUNT	Payment Method	Tax Receipt Requested	DONOR INFORMATION *If we can't read it, we can't receipt it.* Make cheques payable to Camp He Ho Ha.
□ Funds □ Pledge Info Camp use only	\$ □Make this a monthly gift	□Cash □Cheque	□Yes (Must complete mailing address and e-mail) □No	Name: Phone #: Address: City: 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.
□ Funds □ Pledge Info Camp use only	\$ □Make this a monthly gift	□Cash □Cheque	□Yes (Must complete mailing address and e-mail) □No	Name: Phone #: Address: City: Email: Prov: (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 Camp use only	\$ □Make this a monthly gift	□Cash □Cheque	□Yes (Must complete mailing address and e-mail) □No	Name: Phone #: Address: City: Email: Prov: (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 Camp use only	\$ □Make this a monthly gift	□Cash □Cheque	□Yes (Must complete mailing address and e-mail) □No	Name: Phone #: Address: City: Email: Prov: (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 Camp use only	\$ □Make this a monthly gift	□Cash □Cheque	□Yes (Must complete mailing address and e-mail) □No	Name: Phone #: Address: City: Email: Prov: (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 Camp use only	\$ □Make this a monthly gift	□Cash □Cheque	☐Yes (Must complete mailing address and e-mail) ☐No	Name: Phone #: Address: City: Email: Prov: (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.
Total		Box 182,		TOE 2B0 (780) 429-3277 Charitable Registration Number: 11882 7229 RR0001Contact Greg Nielsen greg@camphehoha.com780-429-3277 ext. 222Page of