



Julliette's Place Dance for Hope

Saturday November 19, 2016

PLEDGE FORM

PARTICIPANT'S INFORMATION: **Please complete in full:** Information will be used for processing receipts and communication

Each participant must collect a minimum of \$125 in pledges to participate

* Tax receipts will be issued for all pledges of \$20.00 or more
 * Complete mailing address required for issuing of Tax receipt
 Gather a team and create an online fundraising page at
www.canadahelps.org
 and encourage your friends to support your dance-a-thon

First Name: _____ Last Name: _____
 Home Address: _____ City: _____ Prov: _____ Postal Code: _____
 Email: _____ Home Bus. Phone: _____ Cell: _____

FIRST NAME	LAST NAME	HOME ADDRESS	CITY	PROV.	POS. CODE	AMT. \$	PAID	SIGN.
TOTAL AMOUNT \$								

Please make cheques payable to **Julliette's Place, 31 Tapscott Rd., P.O. Box 37529, Toronto, ON, M1B 5P9**
 Tel: **416-724-7322 ext.237** * Fax: **416-724-1357** * www.juliettesplace.org * scornelissen@juliettesplace.org
Waiver: In submitting this pledge form, I acknowledge that I understand the intent thereof and hereby agree to absolve and hold harmless Julliette's Place, its sponsors, organizations and any other parties affiliated with this event in any way alone or collectively, from and against any blame and liability for any injury, misadventure, harm, loss, inconvenience or damage hereby suffered or sustained as a result of participation in the Julliette's Place Dance for Hope. I hereby grant permission to Julliette's Place to use any portion of my appearance and/or name and likeness as photographed for use in future marketing, advertising and promotional materials.