2018 CHARITY RIDE

INDIVIDUAL/FAMILY

PLEDGE FORM

Name:_____

Address:_____

E-Mail:_____Phone_____

- ✓ We encourage you collect pledges ahead of time. Pledges will count towards your entry registration.
- ✓ Donations are tax deductible. Receipts available upon request (Please check the receipt box if requested).
- ✓ Please make checks payable to **"Make-A-Wish® Wisconsin**."

Donor Name (Please Print Clearly)	Donor Address/Email (Please Print Clearly)	Receipt ✓	Donation $
Total Pledges			

******* Please leave this form at registration for administrative purposes*******