



2021 KENYAN SAFARI FITNESS TREK: PLEDGE COLLECTION FORM

Fundraiser's information:									
Last Name:		First Name:	Home Phone:	Cell Phone:					
Address:		City, Province, State:	Postal code:	E-mail:					
		,,							
	CHEQUES: to CAP Network, with "Village of Love" on memo line;								
	E-TRANSFER: Claire@capnetwork.ca, with fundraiser's name in message field								
	FULL address information is necessary for tax receipts. Charitable registration # 88898 7500 RR0001								
1.	Name:	Address:	City, Province, Postal Cod	е					

1.	Name:	Address:	City, Province, Postal Code	
	Cash/ cheque/ e-transfer	Entered in online system? YES / NO	e-mail address	\$ Amount
	(circle one)			
2.	Name:	Address:	City, Province, Postal Code	
	Cash/ cheque/ e-transfer	Entered in online system? YES / NO	e-mail address	\$ Amount
	(circle one)			
3.	Name:	Address:	City, Province, Postal Code	
	Cash/ cheque/ e-transfer	Entered in online system? YES / NO	e-mail address	\$ Amount
	(circle one)			
4.	Name:	Address:	City, Province, Postal Code	
	Cash/ cheque/ e-transfer	Entered in online system? YES / NO	e-mail address	\$ Amount
	(circle one)			

Page	of	Total donations collected on this page: \$	
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Please mail or deliver cheques + form to Linda, 322 Pacific Ave, Toronto, ON M6P 2P9 (416-766-7265)