2016 Sponsorship Form

Name: _____ Gender: ☐ M ☐ F

Address:_____ Race: ☐5km ☐10km ☐ ½ Marathon

City:_____ Province:_____ Post Code: _____

Tel: _____ Email:_____

Please Note: If you are collecting sponsorship money in lieu of the registration fee, please DO NOT register on-line (the on-line registration fee CANNOT be refunded once it has been paid).

We cannot guarantee a tax receipt if the information provided is not clear and complete.
Tax receipts will be issued for pledges of $10 or more. Please include full postal address for tax receipting purposes.

Sponsors Full Name	Address	City	Post Code	Phone Number	Pledged	Collected	Receipt Issued
John Doe	*123 Any Street*	*Anytown*	*A1A 1A1*	*519 123 4567*	*75*	*75*	
					TOTAL		

Shaded area for WRH office use only.

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