



Please help this bowler raise at least \$225 to support essential programming for survivors of sexual violence

Bowler Name:							Phone:				
Team Captain:											
TOTAL PLEDGES:	\$					TOTAL SUBMITTED:	\$				
	TRCC confirmation here:						TRCC confirmation here:				

Office use	Tax Recept *	Name	HOME ADDRESS	CITY	PROV	POSTAL CODE	May We Contact You	PHONE	AMOUNT	Amt Rec'd
	Y / N						Y / N		\$	Y / N
	Y / N						Y / N		\$	Y / N
	Y / N						Y / N		\$	Y / N
	Y / N						Y / N		\$	Y / N
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	Y / N						Y / N		\$	Y / N
	Y / N						Y / N		\$	Y / N
	Y / N						Y / N		\$	Y / N
	Y / N						Y / N		\$	Y / N
	Y / N						Y / N		\$	Y / N

TOTAL CANADA HELPS DONATIONS:									\$
(ATTACH PRINTOUT OF DONATIONS WITH PLEDGE FORMS www.canadahelps.org)									
TOTAL:									\$

* Tax receipts will be issued for donations of \$20 + (Only if indicated). To receive a tax receipt, you MUST provide full address with postal
 Please make cheques payable to TRCC/MWAR