****

**PLEDGE FORM**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gr:\_\_\_\_\_\_\_\_\_**

**My daily goal is \_\_\_\_\_\_\_\_ minutes per day, for estimated total minutes of \_\_\_\_\_\_\_ between Nov 23 - Dec 13.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Sponsor’s Name** | **Mailing address**  **(only if require a tax receipt - totals of $25 or more)** | **Pledge Amount**  **(flat rate or per minute)** | **Total Due** |
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**Total Collected: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**