

# 2010 WEEKEND OF GRACE PLEDGE FORM

Name of Runner / Rider / Golfer \_\_\_\_\_

Name of Donor	\$ Amount of Pledge	✓ When Collected
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
<b>Total Pledges:</b>	<b>\$ _____</b>	<b>\$ _____</b>