

Pledge Form

REGISTRATION FORM



RUNNER/WALKER'S NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

Raise \$100 or more and receive free race registration

Special recognition at our event for the Top 2 fundraising individuals

Sponsor's Name	Address/City	Zip	Phone	Donation
Joanne Walker (example)	104 Sample St., NY	11119	555-1111	\$100
1				
2				
3				
4				
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15				
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20				

Make all Checks payable to: **BK HOPE CURES**

Download a new pledge form at www.bkhopecures.org

TOTAL
Donations \$

Release Statement

I, _____, release Woodloch Pines, Inc., The Lake Teedyuskung Assoc., the BK Foundation, and the Hope Cures sponsors and organizers from any claims or liability resulting from my participation in the or 5K race.

SIGNED: _____

DATE: _____