



Parkinson Canada

Your fundraiser, your way.

Offline Pledge Form

Please note, this is a fundraising form only.
Registration online or by phone with waiver acceptance is required.

Participant Information

LAST NAME		FIRST NAME		PHONE	
ADDRESS			EMAIL		
CITY	PROVINCE	POSTAL CODE	TEAM/EVENT NAME		
Would you like to learn more about becoming a monthly donor?		<input type="checkbox"/> YES <input type="checkbox"/> NO		Would you like to learn more about making a planned gift to Parkinson Canada?	
				<input type="checkbox"/> YES <input type="checkbox"/> NO	

Please print clearly

Include full mailing address and postal codes
If the information is incomplete, no tax receipt will be issued.
Tax receipts will be mailed within two months of submission.
Tax receipts will automatically be issued for all pledges \$20+.

Please mail collected pledges as soon as possible to:

Fundraising your way
316-4211 Yonge St. Toronto, ON, M2P 2A9

LAST NAME		FIRST NAME		EMAIL	
PHONE	ADDRESS	STREET/CITY/PROV./POSTAL CODE		PLEDGE AMOUNT	<input type="checkbox"/> CASH
				\$	<input type="checkbox"/> CHEQUE

LAST NAME		FIRST NAME		EMAIL	
PHONE	ADDRESS	STREET/CITY/PROV./POSTAL CODE		PLEDGE AMOUNT	<input type="checkbox"/> CASH
				\$	<input type="checkbox"/> CHEQUE

LAST NAME		FIRST NAME		EMAIL	
PHONE	ADDRESS	STREET/CITY/PROV./POSTAL CODE		PLEDGE AMOUNT	<input type="checkbox"/> CASH
				\$	<input type="checkbox"/> CHEQUE

Privacy statement: Parkinson Canada collects personal information to communicate with supporters about initiatives and fundraising. By providing your information, you give consent to be contacted. For a copy of our privacy policy, please contact us: donate@parkinson.ca or call 1(800) 565-3000.

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PHONE	ADDRESS	STREET/CITY/PROV./POSTAL CODE		PLEDGE AMOUNT \$	<input type="checkbox"/> CASH <input type="checkbox"/> CHEQUE

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