



PARTICIPANT PLEDGE FORM

Host name: _____ **City:** _____

Email: _____

Telephone: _____ **Event name:** _____

Organization you are supporting: _____

CRA requires a complete mailing address to receive a tax receipt. Only donations of \$20 and above will be accepted.

DONOR INFORMATION Please print clearly			AMOUNT
Name: _____	Telephone: _____	Email Address: _____	\$ _____
Address: _____	City: _____	Postal Code: _____	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque
Name: _____	Telephone: _____	Email Address: _____	\$ _____
Address: _____	City: _____	Postal Code: _____	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque
Name: _____	Telephone: _____	Email Address: _____	\$ _____
Address: _____	City: _____	Postal Code: _____	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque
Name: _____	Telephone: _____	Email Address: _____	\$ _____
Address: _____	City: _____	Postal Code: _____	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque
Name: _____	Telephone: _____	Email Address: _____	\$ _____
Address: _____	City: _____	Postal Code: _____	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque
TOTAL:			

cfccanada.ca / bigsocial.ca
Charitable #83391 4484 RR0001

Community Food Centres Canada is committed to protecting the privacy of personal information of its constituents in compliance with the Personal Information Protection and Electronic Documents Act (PIPEDA). We use the information collected to facilitate donation collection and processing, to provide tax receipts, to process online registrations and to communicate relevant news and updates. Community Food Centres Canada does not trade, license, rent or sell your personal information.



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