

RBC Race for the Kids Pledge Form

Last name: _____ First name: _____

Phone: _____ Address: _____

City: _____ Prov: _____ Postal Code: _____

Sponsor Name	Mailing Address	Email	Payment Type	Tax Receipt Check	Credit Card Type	Credit Card # (all 16 digits)	Expiry	Amount
John Smith	123 Main Street Toronto, ON M4Y 1H4	john@work.com	<input checked="" type="checkbox"/> Credit card <input type="checkbox"/> Cash <input type="checkbox"/> Cheque	<input checked="" type="checkbox"/>	Visa	1234 1234 1234 1234	07/10	\$50
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Please Note: Tax receipts will be provided for offline donations of \$20.00 or more