



CAP RIDE 2023, June 1-4: PLEDGE COLLECTION FORM

Fundraiser's information:					
Last Name:	First Name:	Home Phone:	Cell Phone:		
Address:	City, Province, State:	Postal code:	E-mail:		

CHEQUES: to CAP Network, with "Village of Love" on memo line; E-TRANSFER: info@capnetwork.ca, with fundraiser's name in message field FULL address information is necessary for tax receipts. Charitable registration # 88898 7500 RR0001

1.	Name:	Address:	City, Province, Postal Code			
	Cash/ cheque/ e-transfer	Entered in online system? YES / NO	e-mail address	\$ Amount		
	(circle one)					
2.	Name:	Address:	City, Province, Postal Code			
	Cash/ cheque/ e-transfer (circle one)	Entered in online system? YES / NO	e-mail address	\$ Amount		
3.	Name:	Address:	City, Province, Postal Code			
	Cash/ cheque/ e-transfer (circle one)	Entered in online system? YES / NO	e-mail address	\$ Amount		
4.	Name:	Address:	City, Province, Postal Code			
	Cash/ cheque/ e-transfer (circle one)	Entered in online system? YES / NO	e-mail address	\$ Amount		

Page _____ of _____ Total donations collected on this page: \$ ______

Please mail or deliver cheques + form to Linda, 322 Pacific Ave, Toronto, ON M6P 2P9 (416-766-7265)