Please bring this completed pledge form and your pledges to the registration Hike Day.
Please make cheques payable to Colchester East Hants Hospice Society.
Charitable Registration number 885434407RR0001
Donations of $20 or more will receive a tax reciept. Please ensure the complete mailing address is provided.

HOSPICE Colchester East Hants
Hike for Hospice

**Hikers Name:** _____ **Team Name:** _____

**Address:** _____ **E-mail:** _____

| Name | Address | City | Postal Code | Telephone | E-Mail | Paid | Cash | Cheque | Pledge |
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CASH TOTAL: _____ CHEQUE TOTAL: _____

100% Of all donations collected during Hike for Hospice stay in our commuity.
For more information on our services or to download more pledge sheets, please visit our website at www.cehhospice.org/hike-for-hospice

Page: _____ of _____