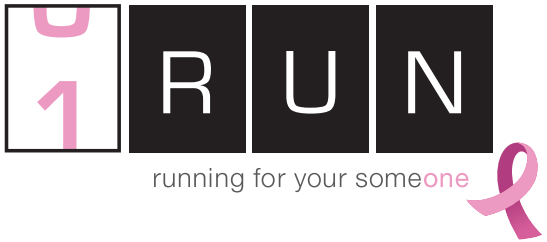
ONERUN Pledge Form



Name: _____

School: _____

Email Address: _____

Phone Number: _____

Thank you for helping us raise funds for Wellspring London

Tax receipts will be issued for pledges of $20 or more. Please make cheques payable to ONERUN.

Sponsor Name	Address	City	Province	Postal Code	Telephone	Pledge Amount	Pledge Paid