



40<sup>th</sup> Toronto Maple Leafs Skate for Easter Seals Kids  
MasterCard Centre



Helping Kids with  
Physical Disabilities  
Succeed

Sunday, December 17, 2017

**OFFLINE PLEDGE FORM**

Participant Name: \_\_\_\_\_ Session: \_\_\_\_\_

Address: \_\_\_\_\_

City, Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Daytime Telephone: ( ) \_\_\_\_\_ E-mail: \_\_\_\_\_

**Please ensure complete information is provided and the full pledged amount is collected and submitted on the event day.**

PLEASE INCLUDE SPONSOR'S NAME AND COMPLETE ADDRESS. PLEASE PRINT CLEARLY. TAX RECEIPTS CANNOT BE ISSUED IF ANY INFORMATION IS INCOMPLETE.				AMOUNT PLEDGED	PAID ✓	PAPER RECEIPT REQUIRED (Y/N)	E-RECEIPT REQUIRED (Y/N)
Please make all cheques payable to "Easter Seals Ontario".				Eg.: \$50.00	✓	Y	
Last name		First name					
Apt. #/TH/Suite	Street Address	City	Postal Code				
	E-mail Address						
Last name		First name					
Apt. #/TH/Suite	Street Address	City	Postal Code				
	E-mail Address						
Last name		First name					
Apt. #/TH/Suite	Street Address	City	Postal Code				
	E-mail Address						
Last name		First name					
Apt. #/TH/Suite	Street Address	City	Postal Code				
	E-mail Address						
Last name		First name					
Apt. #/TH/Suite	Street Address	City	Postal Code				
	E-mail Address						
<b>PLEDGE TOTALS FOR THIS PAGE</b>				<b>\$</b>			

**Please choose only one method for your tax receipt. Tax receipts can be e-mailed if the donor e-mail address is provided and they opt for an e-receipt, otherwise the tax receipt will be mailed post-event.**

To donate to a participant online, please go to [EasterSealsSkate.org](http://EasterSealsSkate.org).

Easter Seals Ontario, One Concorde Gate, Suite 700, Toronto, ON M3C 3N6  
For more information please contact [skate@easterseals.org](mailto:skate@easterseals.org) or 1-800-668-6252.