



THE PARTICIPANT OR TEAM YOU'RE SPONSORING:

[Empty box for participant name]

[1] I'M BEHIND YOU EVERY KILOMETRE!

Please print clearly in the spaces below

Form fields for personal and business information: FIRST NAME, LAST NAME, BUSINESS NAME, MAILING ADDRESS, SUITE/APT #, CITY, PROV, POSTAL CODE, PHONE, EMAIL.

The information you have provided will be used to process your donation and to provide a tax receipt. We may use your contact information to keep you informed of other activities, events and/or fundraising opportunities in support of the Foundation.

[2] I'M SUPPORTING YOU IN THIS HEROIC COMMITMENT!

Please mark the box corresponding to your pledge commitment.

- Options for pledge commitment: HONOURARY WALKER: \$1000, HEROISM: \$750, INSPIRATION: \$500, COMMITMENT: \$250, SPIRIT: \$150, OTHER AMOUNT.

[3] TWO EASY PAYMENT OPTIONS

Based on the selection I made in Section 2, I would like to pay my pledge via: (please choose one form of payment and sign below).

- Payment options: SINGLE PAYMENT IN FULL AMOUNT (Cheque, Credit Card) and INSTALLMENT PAYMENTS (CREDIT CARD ONLY).

Table with 4 columns: ACCOUNT NUMBER, EXP DATE, CVV, NAME ON THE CREDIT CARD.

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Total Amount: \$_____ to be paid in _____ monthly payments of \$_____

Payments must be completed by December 31, 2020 to count towards Kidney March 2020.

IMPORTANT: Please read and complete the following. I (we) hereby authorize The Kidney Foundation of Canada to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to my (our) account each month.

I have read and understand the above.

SIGNATURE and DATE fields.

[4] HONOUR ROLL OPTIONS

Selection will appear on the Participant's Personal Page.

- Options for Honour Roll: Show my Name and Amount, Show my Name Only, Show my Name as Anonymous, Custom: Show Amount? Yes/No.

THANK YOU! PLEASE MAIL THIS FORM DIRECTLY TO THE ADDRESS ON THE RIGHT.

THANK YOU

Thank you for sponsoring a Kidney March participant. Please read this pledge form carefully, and fill it out completely and legibly to prevent processing delays.

PLEASE MAKE CHEQUES PAYABLE TO:

THE KIDNEY FOUNDATION OF CANADA

Pledges are tax deductible to the fullest extent allowed by law. Pledges are non-refundable and non-transferable.

MATCHING GIFT PROGRAMS

Many companies provide their employees with matching gifts/ pledges. Please check with your employer on specific matching gift guidelines.

IMPORTANT NOTE

Kidney March is committed to ensuring that the maximum percentage of donor dollars is returned to The Kidney Foundation of Canada. We cannot predict, however, what the percentage will be.

Send all pledges and pledge forms directly to:

The Kidney Foundation 6007 1A St SW Calgary, AB T2H 0G5

QUESTIONS? 1.866.9 KMARCH info@kidneymarch.ca



The foundation of kidney care.

Charitable Registration No. 10756 7398 RR0001

