



2025 Brunch, Bid & Bowl Pledge Form

Bowler's Last Name: _____ First Name: _____

Team Name : _____

Mailing Address (Street, Apt, City, Postal Code): _____

Email: _____ Phone: _____

All proceeds to support the work of Birchway Niagara. Charitable registration Number 131135717 RR0001. Please make cheques payable to Birchway Niagara. Receipts will be issued for donations of \$20 or more to donors who provide complete, legible address information.

Sponsor Name	Street Address, Unit Number	City	Postal Code	Phone #	Email Address	Pledge Amount (check if collected)	Receipt Issued
John Smith	123 Somewhere St., Unit 2	Anywheretown	A2A 2A2	(200) 000-000	me@me.com	\$20.00 <input checked="" type="checkbox"/>	
						<input type="checkbox"/>	Shaded area for office use only.
						<input type="checkbox"/>	
						<input type="checkbox"/>	
						<input type="checkbox"/>	
						<input type="checkbox"/>	
						<input type="checkbox"/>	
						<input type="checkbox"/>	
						<input type="checkbox"/>	
						<input type="checkbox"/>	
						<input type="checkbox"/>	
Total offline pledges enclosed							Staff / volunteer initial

Total online pledges + Total offline pledges enclosed = Fundraising Grand Total!

I confirm that the total offline pledges listed above includes all funds that I have collected offline as a participant in the 2025 Brunch, Bid & Bowl event.

Date: _____ Participant/Guardian Signature: _____ Page ___ of ___