

Name: _____

Telephone: _____

Email address: _____

Team name: _____

Office Use Only		
Registration Checklist	On-Site Cash Control	Additional Payments
Team Name	Amount Received \$	Amount \$
Date	Amount Owing \$	
Initials of staff	Verified By	

Eco Endurance Challenge 2016 – Pledge Form

Sponsor's Name	Email Address	Telephone	Amount \$	Paid?
Total <small>This sheet only</small>			\$	

Receipts: Income tax receipts will be issued for paid pledges of \$10 or more. Tax receipts will be emailed to sponsors at the email address they provide. Sponsor email addresses will not be used for any further contact by the E2C team or by Halifax Regional Search and Rescue, and will be destroyed after tax receipts have been issued.