

# Special Olympics Ontario Truck Ride Pledge Form



**Driver Name** \_\_\_\_\_  
**Company** \_\_\_\_\_ **Tel** \_\_\_\_\_  
**Email** \_\_\_\_\_

*I will be participating in the Special Olympics Truck Ride in September. We hope to raise funds for children and adults with an intellectual disability by providing sport training and competition. I need your help. Will you please sponsor me by making a tax deductible donation to Special Olympics Ontario today? Thank you!*

**(Please Print)**

| Donor Name | Address<br>(Street, City, Province, Postal Code) | Telephone/Email | Amount<br>(Please check payment method) |                                 |
|------------|--|-----------------|---|---------------------------------|
|            |  | Tel:            | \$ .                                    |                                 |
|            |  | Email:          | Cash <input type="checkbox"/>           | Cheque <input type="checkbox"/> |
|            |  | Tel:            | \$ .                                    |                                 |
|            |  | Email:          | Cash <input type="checkbox"/>           | Cheque <input type="checkbox"/> |
|            |  | Tel:            | \$ .                                    |                                 |
|            |  | Email:          | Cash <input type="checkbox"/>           | Cheque <input type="checkbox"/> |
|            |  | Tel:            | \$ .                                    |                                 |
|            |  | Email:          | Cash <input type="checkbox"/>           | Cheque <input type="checkbox"/> |
|            |  | Tel:            | \$ .                                    |                                 |
|            |  | Email:          | Cash <input type="checkbox"/>           | Cheque <input type="checkbox"/> |
|            |  | Tel:            | \$ .                                    |                                 |
|            |  | Email:          | Cash <input type="checkbox"/>           | Cheque <input type="checkbox"/> |
|            |  | Tel:            | \$ .                                    |                                 |
|            |  | Email:          | Cash <input type="checkbox"/>           | Cheque <input type="checkbox"/> |

\* Please make all cheques payable to: **Special Olympics Ontario**. Mail along with pledge form(s) to:  
**Special Olympics Ontario, 65 Overlea Blvd, Suite 200, Toronto, Ontario, M4H 1P1**

. Please do not send cash through the mail. Tax receipts will only be issued for donations \$20 or greater.

[truckride.ca](http://truckride.ca)

Special Olympics Ontario Registered Charitable Number - 11906 8435 RR0001

| Donor Name | Address<br>(Street, City, Province, Postal Code) | Phone Number | Amount<br>(Please check payment method) |                                 |
|------------|--|--------------|---|---------------------------------|
|            |  |              | Cash <input type="checkbox"/>           | Cheque <input type="checkbox"/> |
|            |  |              | \$                                      | .                               |
|            |  |              | Cash <input type="checkbox"/>           | Cheque <input type="checkbox"/> |
|            |  |              | \$                                      | .                               |
|            |  |              | Cash <input type="checkbox"/>           | Cheque <input type="checkbox"/> |
|            |  |              | \$                                      | .                               |
|            |  |              | Cash <input type="checkbox"/>           | Cheque <input type="checkbox"/> |
|            |  |              | \$                                      | .                               |
|            |  |              | Cash <input type="checkbox"/>           | Cheque <input type="checkbox"/> |
|            |  |              | \$                                      | .                               |
|            |  |              | Cash <input type="checkbox"/>           | Cheque <input type="checkbox"/> |
|            |  |              | \$                                      | .                               |
|            |  |              | Cash <input type="checkbox"/>           | Cheque <input type="checkbox"/> |

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|                 |   |                   |   |                 |   |
|-----------------|---|-------------------|---|-----------------|---|
| <b>Cash: \$</b> | . | <b>Cheques \$</b> | . | <b>TOTAL \$</b> | . |
|-----------------|---|-------------------|---|-----------------|---|

**truckride.ca**

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