



**CLIMB AGAINST CANCER PLEDGE FORM ●**  
**SEPTEMBER 14, 2019 ● Cranmore Mtn Resort**

Last Name \_\_\_\_\_ First \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Team Name (if applicable) \_\_\_\_\_

May we add you to our: Newsletter \_\_\_\_\_ Annual Appeal Mailing \_\_\_\_\_

Volunteer List \_\_\_\_\_

**TO QUALIFY FOR PRIZES ALL MONEY MUST BE TURNED IN ON SEPTEMBER 14<sup>TH</sup>**

Checks are preferred and should be payable to: Jen's Friends Cancer Foundation

Name	Mailing Address	City/ State/Zip	Amount Given
------	-----------------	-----------------	--------------

-----

Example: Jane Smith	123 Main Street	Hometown NH 03860	\$50
---------------------	-----------------	-------------------	------

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_

Use reverse side of page for additional pledges

**TOTAL** \_\_\_\_\_