

9th Annual BOWL-A-THON

PLEDGE FORM

TEAM NAME:					
Bowler Name:	Phone:				
Address:	City/State:				
Email:					Zip:
	10am-11:30am		2pm-3:3	Opm 4p	m-5:30pm
Fundraising Goal:	Total Raised:				
Name of Diadra				Amazunt	Donation True
Name of Pledge Donor		mail Address deductible thank you)		Amount	Donation Type
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					☐ Cash ☐ Check
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<u>Suggested</u> Fundraising Minimum is \$100 per Bowler or \$400 per Team. To make a pledge on line, please visit <u>www.bowlathon.net/event/dch-bowlathon-2017</u>