



**Every step helps young people  
and our community**  
Scotiabank Charity Challenge

**May 26, 2019**

2019 Scotiabank Charity Challenge  
at the Scotiabank Calgary  
Marathon

All donations \$20 or greater eligible for a  
charitable tax receipt

**PLEDGE FORM: All donations support Foothills Academy Society**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Sponsor Name	Mailing Address	Email	Payment Type	Tax Receipt?	Credit Card Type	Credit Card # (all 16 digits)	Expiry Date	Amount
John Smith	123 Main St. Calgary, AB T2N 4T1	john@work.com	<input type="checkbox"/> Credit Card <input type="checkbox"/> Cash <input type="checkbox"/> Check	<input type="checkbox"/> Yes <input type="checkbox"/> No	VISA	1234 1234 1234 1234	07/10	\$50
			<input type="checkbox"/> Credit Card <input type="checkbox"/> Cash <input type="checkbox"/> Check	<input type="checkbox"/> Yes <input type="checkbox"/> No				
			<input type="checkbox"/> Credit Card <input type="checkbox"/> Cash <input type="checkbox"/> Check	<input type="checkbox"/> Yes <input type="checkbox"/> No				
			<input type="checkbox"/> Credit Card <input type="checkbox"/> Cash <input type="checkbox"/> Check	<input type="checkbox"/> Yes <input type="checkbox"/> No				
			<input type="checkbox"/> Credit Card <input type="checkbox"/> Cash <input type="checkbox"/> Check	<input type="checkbox"/> Yes <input type="checkbox"/> No				
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			<input type="checkbox"/> Credit Card <input type="checkbox"/> Cash <input type="checkbox"/> Check	<input type="checkbox"/> Yes <input type="checkbox"/> No				