2009 County Marathon Pledge Form
in support of the

Prince Edward County Memorial Hospital Foundation

Participant Name: _____
Address:
_____
_____
_____
Phone: _____E-mail: _____

Donor Name	Address Street/P.O. Box, City, Province	Postal Code	Pledge amount $	Paid ✔
		Total	$	

Please make cheques payable to Prince Edward County Memorial Hospital Foundation
Tax receipts will be issued for donations over $20.00
PECMH Foundation Charitable Number – BN 13287 6855 RR0001
For more information contact the Foundation at 613-476-1008 ext. 4503 or visit us online at www.pecmhf.ca

Thank you for your support!