BIST
Brain Injury Society of Toronto

# BIST 5K Run, Walk & Roll 2017 Fundraising Form

**Name of Participant** .....

| Name | Address | Postal Code | Email | Amount | Paid |
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| | | | **Total** | | |

Continue on 2nd sheet if needed.
Donations of $20 or more will receive a tax receipt by mail/email. Please bring your completed pledge form and fundraising total to the registration desk on the day of the event, or if you will not be in attendance, please call 416-830-1485 to make other arrangements.

Thank You for Your Support!