



August 21st, 2021

# PLEDGE REGISTRATION FORM

Use this form to collect pledges from friends, family and co-workers.

**After the Walk-A-Thon you will...**

Once you collect the Pledge amounts please submit to HACCM with this pledge sheet.

If payment is preferred by credit card, please direct them to our website at

[www.hellenicamericanc.org](http://www.hellenicamericanc.org)

**3131 NE Glisan, Portland, OR 97232**

Participant Name: \_\_\_\_\_

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

Pledge #	First Name	Last Name	Amount Pledged	Mailing Address / City / State / ZIP	Email	Phone	Check #	Cash
1			\$					
2			\$					
3			\$					
4			\$					
5			\$					
6			\$					
7			\$					
8			\$					
9			\$					
10			\$					
11			\$					
12			\$					
13			\$					
14			\$					
15			\$					