

**WOMEN'S 5K CLASSIC, INC. PLEDGE FORM**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

TEAM \_\_\_\_\_

Any person who collects \$100 or more will receive a gift.

All pledge money must be submitted by Race Day. Pledge forms should be dropped off at the "Pledge Desk" at packet pickup. Any pledge money submitted after race day will go in the general donation fund. Proceeds benefit breast and gynecologic cancer awareness, prevention, research and support programs in the greater Lehigh Valley.

**NAME (PLEASE PRINT) PLEDGE**

1. \_\_\_\_\_ \$ \_\_\_\_\_

2. \_\_\_\_\_ \$ \_\_\_\_\_

3. \_\_\_\_\_ \$ \_\_\_\_\_

4. \_\_\_\_\_ \$ \_\_\_\_\_

5. \_\_\_\_\_ \$ \_\_\_\_\_

6. \_\_\_\_\_ \$ \_\_\_\_\_

7. \_\_\_\_\_ \$ \_\_\_\_\_

8. \_\_\_\_\_ \$ \_\_\_\_\_

9. \_\_\_\_\_ \$ \_\_\_\_\_

10. \_\_\_\_\_ \$ \_\_\_\_\_

**TOTAL CONTRIBUTION: \$ \_\_\_\_\_**

Contributions are tax deductible to the extent of the law.

CERTIFICATE OF REGISTRATION NO. 26547 - Questions? Call 610-737-3125