

FIREFIGHTER STAIRCLIMB CHALLENGE

www.calgarystairclimb.com

OFFICIAL CASH & CHEQUE FORM FOR FIREFIGHTER STAIRCLIMB

Please print clearly. If the information is not legible, a tax receipt may not be issued.

Participant Name: _____

Participant DAYTIME Phone#: _____

Participant EMAIL: _____

TEAM Name: _____

For online credit card donations: please obtain the personalized fundraising page link from the person you are sponsoring

DONOR NAME (PLEASE PRINT)	MAILING ADDRESS (PLEASE PRINT CLEARLY)	CITY & PROVINCE	POSTAL CODE	DAY TELEPHONE	Cash X	Cheq X	AMOUNT	TAX RECEIPT - Y/N

Page # ____ of ____	Total Donations Collected (THIS PAGE):
Total must match enclosed cash and cheques. Please record every donation you hand in.	

Please make all cheques payable to Wellspring Calgary. Tax receipts will be issued for amounts of \$20.00 or more with a valid mailing address, unless otherwise requested.
Please return form and donations to Wellspring Calgary, Attn. Fund Development, 1404 Home Rd NW, Calgary, AB T3B 1G7 (403-521-5292). Please DO NOT mail cash.