

Pledge Form

TEAM NAME				
WALKER FIRST NAME	LAST NAME			
ADDRESS		CITY	STATE ZIP CODE	
AIM HIGH! 9 Ways in 9 Days to get people to cont	ribute Here is a simple plan.			
Day 1 Put in your contribution Day 2 Ask your spouse/partner Day 3 Ask 3 relatives	Day 4 Ask 3 friends Day 5 Ask 3 co-workers Day 6 Ask 3 neighbors	Day 7 Ask 3 people from your place of worship Day 8 Ask 2 local merchants you frequent Day 9 Celebrate you did it!		
Name	Home addr	ress and phone number		Pledge
Please make checks payable to: CBCF Bring this for	m to any Valley branch for deposit into The Cure Bro	east Cancer Foundation	account. TOTAL	