



## TREK'N'TREAT PLEDGE FORM

Use this form to collect pledges locally from friends, family, and co-workers. Please collect checks and bring them along with this form to the CIS office by October 23, 2023, or to the event on October 28.

Community Interface Services is a private non-profit 501c 3. All proceeds go to the Angel Fund and supports individuals with developmental disabilities, their family members, and staff.

**WALKER'S NAME** \_\_\_\_\_ **EMAIL** \_\_\_\_\_  
**ADDRESS (CITY, STATE, ZIP)** \_\_\_\_\_

**PERSONAL FUNDRAISING GOAL \$** \_\_\_\_\_

**Pledge #1 Name** \_\_\_\_\_ **Amount** \$ \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_

**Pledge #2 Name** \_\_\_\_\_ **Amount** \$ \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_

**Pledge #3 Name** \_\_\_\_\_ **Amount** \$ \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_

**Pledge #4 Name** \_\_\_\_\_ **Amount** \$ \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_

**Pledge #5 Name** \_\_\_\_\_ **Amount** \$ \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_

**Pledge #6 Name** \_\_\_\_\_ **Amount** \$ \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_

**Pledge #7 Name** \_\_\_\_\_ **Amount** \$ \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_

Thank you for your support.