



Student's Name: _____ Grade: _____

Teacher's Name: _____ Classroom: _____

- Donations can also be made online at: www.charleshbest.com/dunkfordiabetes
- Receipts issued for pledges of \$20.00 or more *(please print legibly & provide home and email address)*
- All outstanding monies must be submitted by September 23, 2019

Name	Address	Email	Pledge Amount	Paid? Y/N

Please make all cheques payable to: **The Charles H. Best Diabetes Centre** Amount Collected: _____
PLEASE DO NOT INCLUDE DONATIONS MADE ONLINE ON THIS PLEDGE FORM. Online Total: _____
 Amt Outstanding: _____
TOTAL RAISED: _____

Waiver/Release: by participating in the Dunkin' for Diabetes event, I waive and release any and all claims for myself, heirs, executors and administrators against all sponsors, officials and organizers of the event including but not limited to St. Ignatius Loyola Catholic School, The Charles H. Best Diabetes Centre for Children & Youth, their sponsors and their properties, Investors, members and owners for injury, illness or death which may directly result from my participation in this event. I shall permit the free use of my name and picture in publicity resulting from the event. I am physically fit to participate in this event. I have read, understood and agree with the contents of this waiver/release prior to participating in the 2019 Dunkin' for Diabetes event.

 Signature of Participant (or Guardian if under 18)

 Date