

Pledge Form

Kindly e-mail registration form and payment to: **Rhunah Soriano** | (514) 559-3780 | rhunah.soriano@gmail.com

Basic Information

First Name: _____ **Last Name:** _____ **Title:** Mr. Ms.
Company: _____ **Bus. Number:** _____
Address: _____ **City:** _____ **Province:** _____ **Postal Code:** _____
Email: _____ **Phone Number:** _____

Participation Options: You may choose to bike and/or promote or simply make a donation to your favourite non-profit.

1. Bike: Minimum Fee:\$250 Group Individual **Beneficiary:** Projet LOVE Solaris Centre Mundialito Canada

Length of the participation measured per hour:

One Two Three Four Five Six Seven Eight

2. Marketing Incentive: A: \$1,000 B: \$500

I CANNOT PARTICIPATE, BUT ENCLOSED IS A DONATION

Payment Methods

PayPal | e-Transfer: rhunah.soriano@gmail.com

Signature: _____ City: _____ Date: _____