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| **PLEDGE FORM**

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| **Sponsor Name** | **E-Mail** | **Pledge $** | **Pledge in Memory / Honor of** |
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**Pledge Collection Information**

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| --- | --- |
|  | REGISTRATION FEE WAIVED for $25 (min) in pledge collections |
|  | The person who raises the most funds and the person who gets the largest number of pledges will win a great prize! |

 | **Registration Form** Walker’sName \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Please bring all pledges (cash or check) and your pledge form with you on April 29th and check in at the gathering area or mail to Wilton Mall at Saratoga, 3065 Route 50, D-1, Box 68, Saratoga Springs, NY 12866. Make checks payable to H.O.P.E. Animals must be leashed and current on vaccinations. Hope to see you! |
|  |
| **WAIVER**I hereby release Homes for Orphaned Pets Exist, H.O.P.E., and all municipal agencies whose property and/or personnel are used and other sponsoring or co-sponsoring individuals from responsibility for any injuries or damages I, my child or pet may suffer as a result of my/his/her/their participation in H.O.P.E.’s Spring Walk in the Park. In addition, I permit the use of my/his/her/their photo in newspapers, brochures, or other promotional materials without compensation. I have read the entry form and certify compliance by signing below.Walker’sSignature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |