

Pledge Form - BOWLING FOR MILK AND BREAD

Will take place Saturday, January 28, 2017, 1 - 5 pm at Keglers Bowling Center, Manawa

BOWLER'S NAME: _____ Grade _____ PHONE: _____ E-MAIL: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

	SPONSOR NAME	MAILING ADDRESS	CITY	STATE	ZIP	PHONE	E-MAIL	PLEDGE PER PIN	FLAT cash	PLEDGE check	PAID
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											

Total pledges per pin = _____

Total of flat pledges = _____	Total number of pledge pages = _____
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Please make checks payable to **Manawa C.A.R.E.S.** And then put on the memo line put **“Milk and Bread”**

Bowlers -- Please remember to explain to your sponsors: They may choose to pledge PER PIN, or a FLAT PLEDGE. PER PIN Pledges are made with the understanding that 100 will be the lowest score for which your sponsors will support you. So a pledge of .25 cents per pin will result in a minimum pledge of \$25.00 for any score you get of 100 or below -- But, for example, if you bowl 200, the pledge of .25 cents per pin would amount to a pledge of \$50. **Hint to Bowlers:** A flat pledge, which is usually paid up front, is convenient because you do not have to collect funds after the Bowling for Milk and Bread event..

	SPONSOR NAME	MAILING ADDRESS	CITY	STATE	ZIP	PHONE	E-MAIL	PLEDGE PER PIN	FLAT cash	PLEDGE check	PAID
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											
21											
22											
22 3											
24											
25											

BOWLER'S NAME: _____ Grade _____ PHONE: _____ E-MAIL: _____ page 2

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

	SPONSOR NAME	MAILING ADDRESS	CITY	STATE	ZIP	PHONE	E-MAIL	PLEDGE PER PIN	FLAT cash	PLEDGE check	PAID
26											
27											
28											
29											
30											
31											
32											
33											
34											
35											
36											
37											
38											
39											
40											

BOWLER'S NAME: _____ Grade _____ PHONE: _____ E-MAIL: _____ page 3

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____