



# PLEDGE FORM

Donate online at [thegive.ca/cardiacwalksussex](http://thegive.ca/cardiacwalksussex)

Participant Name: \_\_\_\_\_

The Annual Sussex  
**Cardiac Rehab Walk**  
 Saturday, October 1, 2022  
 Nutrien Civic Center

Date	Name	Full Mailing Address	Phone	Email	Donation Amount	Paid	Receipt Required

Signature of Participant: \_\_\_\_\_

Total Donations: \_\_\_\_\_

For more information contact:  
 Margot Grant at (506) 651-9364  
 Margot.Grant@horizonnb.ca

**Please make Cheques payable to :**  
 Saint John Regional Hospital Foundation

**\*\* Minimum donation of \$15 required for tax receipt \*\***  
 Foundation Charitable Registration # 11913.2363.RR0001

Thank You For Your Support

**SAINT REGIONAL  
 JOHN HOSPITAL FOUNDATION**  
**FONDATION DE L'HÔPITAL SAINT  
 RÉGIONAL JOHN**