



SOCIÉTÉ DE LA SCLÉROSE LATÉRALE AMYOTROPHIQUE DU QUÉBEC  
 AMYOTROPHIC LATERAL SCLEROSIS SOCIETY OF QUEBEC  
 LA MALADIE DE LOU GEHRIG'S DISEASE  
 www.sla-quebec.ca

I raise funds in honor of:

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ROULEZ POUR VAINCRE LA SLA  
 RIDE TO FIGHT ALS  
présenté par / presented by TELUS SANTÉ HEALTH

## RIDE FOR ALS Sollicitor's information

Name: Mr/Mrs. \_\_\_\_\_  
First name Last name

Address : \_\_\_\_\_ Apt.: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code : \_\_\_\_\_

Email : \_\_\_\_\_ Tel (\_\_\_\_\_) : \_\_\_\_\_ - \_\_\_\_\_

Sex : F  M  Language : Fr  En

Donation towards: ALS Society of Quebec

**Donor information** - Please print clearly: if we can't read it, we can't receipt it...

	Donor First and Last name	Address (Street, Apt, City, Province)	Postal Code	Telephone/Email	Payment method (circle)	\$	Cheque number
1				T: E:	Cash Cheque		
2				T: E:	Cash Cheque		
3				T: E:	Cash Cheque		
4				T: E:	Cash Cheque		
5				T: E:	Cash Cheque		
6				T: E:	Cash Cheque		
7				T: E:	Cash Cheque		
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Please photocopy this form if you need extra copies

Receipts will be issued for all donations of \$20 or more unless requested.

<b>Subtotal</b> (This page only)	
<b>Total donations</b> (All pages)	

Send this form, along with the lump sums, to :  
 ALS Society of Quebec - Ride for ALS  
 5415 Paré, Suite 200  
 Mont-Royal, QC H4P 1P7

## RIDE FOR ALS - PLEDGE SHEET (Cont'd)

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11				T: E:	Cash Cheque		
12				T: E:	Cash Cheque		
13				T: E:	Cash Cheque		
14				T: E:	Cash Cheque		
15				T: E:	Cash Cheque		
16				T: E:	Cash Cheque		
17				T: E:	Cash Cheque		
18				T: E:	Cash Cheque		
19				T: E:	Cash Cheque		
20				T: E:	Cash Cheque		
21				T: E:	Cash Cheque		
22				T: E:	Cash Cheque		

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