

HEAD & NECK ABOVE CANCER

Participant name: _____ Address: _____ Phone: ____ E-mail____

Team name:						
PLEDGE FORM *Please make cheques payable to 'London Health Sciences Foundation - Head & Neck Above Cancer*						
NAME	ADDRESS	CITY	POSTAL CODE	PHONE #	CASH OR CHEQUE	PAYMENT (\$)

Thank you for your donation to Head & Neck Above Cancer. Event proceeds support Head & Neck Cancer Research which aims to improve quality of lives of patients at London Health Sciences Centre.

*Please note that donations over \$20 will receive a tax receipt in the mail after the event.

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