

Participant Information

First Name _____
 Last Name _____
 Email _____
 Address _____
 Postal Code _____
 Phone Number _____

CAMP JUMOKE 9TH ANNUAL BOWL-A-THON

PLAYTIME BOWL, 33 SAMOR RD., TORONTO
 SATURDAY, FEBRUARY 25TH 2012
 REGISTRATION FROM 11:00 A.M. - 12:30 P.M.
 BOWLING FROM 1 P.M. - 4 P.M.
 PRE-REGISTER TEAM OF 5 AT 416-410-2995
 OR ONLINE AT WWW.JUMOKE.ORG.
 PRE-REG TEAMS RAISING \$1000 OR MORE
 ENTERED INTO DRAW FOR \$250 CASH!



Please support CJ and become a Member! Check the Membership box and include \$10 membership fee in addition to your pledge. (Must include contact address and phone number)

1	First Name	Last Name	Phone #	Amount	Paid
	<input style="width: 100%;" type="text"/>			\$ _____	<input type="checkbox"/>
	Apt #	Address	City Prov Postal Code	\$10 membership	<input type="checkbox"/>
	<input style="width: 100%;" type="text"/>				
2	First Name	Last Name	Phone #	Amount	Paid
	<input style="width: 100%;" type="text"/>			\$ _____	<input type="checkbox"/>
	Apt #	Address	City Prov Postal Code	\$10 membership	<input type="checkbox"/>
	<input style="width: 100%;" type="text"/>				
10	First Name	Last Name	Phone #	Amount	Paid
	<input style="width: 100%;" type="text"/>			\$ _____	<input type="checkbox"/>
	Apt #	Address	City Prov Postal Code	\$10 membership	<input type="checkbox"/>
	<input style="width: 100%;" type="text"/>				
	TOTAL PLEDGES				\$ <input style="width: 50px;" type="text"/>

PLEASE MAKE ALL CHEQUES PAYABLE TO: **Camp Jumoke**
 1457 Dundas Street West, Suite 203, Toronto, ON M6J 1Y7
 Tel.: 416-410-2995 Fax: 416 920-2064 Website: www.jumoke.org Email: info@jumoke.org

RELEASE: In submitting this registration form, I acknowledge that I understand the intent thereof, and I hereby agree to absolve and hold harmless the Camp Jumoke, Corporate Sponsors, Co-operating Organizations and any other parties affiliated with this event in any way alone or collectively, from and against any blame and liability for any injury, misadventure, harm, loss, inconvenience or damage hereby suffered or sustained as a result of participation in the 2012 Bowl-a-thon. I hereby grant permission to Camp Jumoke to use any portion of my appearance and/or name and likeness as photographed for use in future marketing, advertising and promotional materials.

Charitable Registration Number 890014970RR0001 Tax receipts will be issued for pledges of \$20.00 or more. Complete mailing address required for Tax Receipt

SIGNATURE _____

THANK YOU FOR SUPPORTING CAMP JUMOKE
 For additional Pledge forms please contact Camp Jumoke