

Saturday, September 23, 2023 • 23 septembre 2023

Festival start 10am | Walk/Run start 11am • ouverture 10 h | départ de la marche/course 11 h

Let's Reconnect! • Cette année on va reconnecter ensemble!

#freethespiritfestival

**FREE THE
SPIRIT
FESTIVAL**



**FESTIVAL
LIBÈRE
L'ESPRIT**

FREETHE SPIRIT FESTIVAL.CA

Participant: _____ Walking 2K Running 5K

Email: _____ Phone #: _____

Are you a Team Captain? Y N

Team Name: _____

Name: Nom:		Address: Adresse:	
Email: Courriel:		City: Ville:	Postal Code: Code postale:
Pledge: Promesse de don:	Paid? Payé?	Method of payment: Mode de paiement:	Cash: Espèces:
Credit card #: N° de carte:	Signature:	Expiry date: Date d'expiration:	____ / ____

Name: Nom:		Address: Adresse:	
Email: Courriel:		City: Ville:	Postal Code: Code postale:
Pledge: Promesse de don:	Paid? Payé?	Method of payment: Mode de paiement:	Cash: Espèces:
Credit card #: N° de carte:	Signature:	Expiry date: Date d'expiration:	____ / ____

Name: Nom:		Address: Adresse:	
Email: Courriel:		City: Ville:	Postal Code: Code postale:
Pledge: Promesse de don:	Paid? Payé?	Method of payment: Mode de paiement:	Cash: Espèces:
Credit card #: N° de carte:	Signature:	Expiry date: Date d'expiration:	____ / ____

Donor name and address **MUST** be complete and legible in order for St.Amant Foundation to issue a tax receipt for donations of \$15 or more. Please make cheques payable to St.Amant Foundation. Accepted credit cards: Visa, MasterCard & American Express.

Pledge forms and monies can be submitted to St.Amant Foundation prior to September 23 by contacting Ginette (gsabourin@stamant.ca / 204-256-4301 ext.7051) or at the event.



Charitable Registration #: 123526915RR0001

Name: Nom:		Address: Adresse:		
Email: Courriel:		City: Ville:	Postal Code: Code postale:	
Pledge: Promesse de don:	Paid? Payé? <input type="checkbox"/>	Method of payment: Mode de paiement:	Cash: Espèces: <input type="checkbox"/>	Cheque: Chèque: <input type="checkbox"/>
Credit card #: N° de carte:		Signature:		Expiry date: Date d'expiration: ____ / ____

Name: Nom:		Address: Adresse:		
Email: Courriel:		City: Ville:	Postal Code: Code postale:	
Pledge: Promesse de don:	Paid? Payé? <input type="checkbox"/>	Method of payment: Mode de paiement:	Cash: Espèces: <input type="checkbox"/>	Cheque: Chèque: <input type="checkbox"/>
Credit card #: N° de carte:		Signature:		Expiry date: Date d'expiration: ____ / ____

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Email: Courriel:		City: Ville:	Postal Code: Code postale:	
Pledge: Promesse de don:	Paid? Payé? <input type="checkbox"/>	Method of payment: Mode de paiement:	Cash: Espèces: <input type="checkbox"/>	Cheque: Chèque: <input type="checkbox"/>
Credit card #: N° de carte:		Signature:		Expiry date: Date d'expiration: ____ / ____

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Email: Courriel:		City: Ville:	Postal Code: Code postale:	
Pledge: Promesse de don:	Paid? Payé? <input type="checkbox"/>	Method of payment: Mode de paiement:	Cash: Espèces: <input type="checkbox"/>	Cheque: Chèque: <input type="checkbox"/>
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