

Living Water Bicycle Tour

NAME _____
 ADDRESS _____
 CITY/ST/ZIP _____
 OFFICE/ORG/GROUP _____
 E-MAIL _____

Instructions: Please ask friends/family/co-workers
 To sponsor your ride through a one-time pledge to be
 collected by you, the cyclist, prior to the event. All
 checks should be made payable to: KFM Church
 Sponsors may also use our Website's PayPal account
 to send in donations. (www.kfmconnect.com)

Please keep me informed of what's happening at KFM!

Children must have a parent or guardian present.

	NAME	ADDRESS (please include zip)	AMOUNT	Need a Tax Receipt? (✓)
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Need more room? Please feel free to copy or call for additional pledge sheets!

You reached your GOAL!

Signature: _____ Date: _____