ROCKWAY MENNONITE COLLEGIATE'S

31ST ANNUAL Golf CLASSIC

- Monday, May 25, 2026
- Grey Silo Golf Club

PLEDGE FORM

Golfer's Name: (first and last – *please print clearly*) ______________________

Mailing Address: ______________________

City & Postal Code: ______________________

Phone: ______________ ***Email:** ______________________

☐ Please check this box to give **explicit permission** for Rockway to email you. We do not sell, share or trade your personal contact information, and are in touch only for Rockway purposes. At any time, if you want to change how we communicate with you, please contact 519-743-5209 or advancement@rockway.ca. Thank you.

(donors will receive a charitable tax receipt for the full value of their gifts)

DONOR NAME, MAILING ADDRESS, PHONE NUMBER & EMAIL (PLEASE PRINT. *Charitable tax receipts will be issued only for monies received and where we have correct name and contact information – thank you. Unpaid pledges will be invoiced.)*	DONATION/PLEDGE AMOUNT (Please indicate amount below)	PAYMENT (Please Check One)
Company and/or Person: ______ **Phone:** ______ **Email:** ______ **Mailing Address:** ______ **City:** ______ **Province:** ______ **Postal Code:** ______	$ ______	☐ Cash ☐ Cheque ☐ Credit Card (Phone/Office) ☐ Online
Company and/or Person: ______ **Phone:** ______ **Email:** ______ **Mailing Address:** ______ **City:** ______ **Province:** ______ **Postal Code:** ______	$ ______	☐ Cash ☐ Cheque ☐ Credit Card (Phone/Office) ☐ Online
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