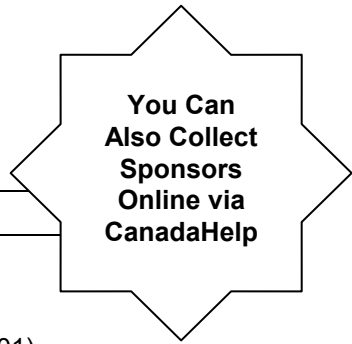




Momiji Health Care Society  
 3555 Kingston Road, Scarborough, ON M1M 3W4  
**16<sup>TH</sup> FUNDRAISING BOWLATHON**  
 Sunday, May 26, 2024



**SPONSOR SHEET**

**TOTAL \$** \_\_\_\_\_

- (1) In the event you are unable to bowl, please mail or hand in your sponsor sheet and proceeds to Momiji at the above address.
- (2) Please make cheques payable to **Momiji Health Care Society**. Please do not mail cash.
- (3) Income tax receipts will be mailed for donations of \$20.00 or more, under \$20.00 upon request. (Charitable registration #1007716623-RR0001).

**Bowler's name:** \_\_\_\_\_ **Telephone Number:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

Please confirm if you and/or your Team [include Team Name] also signed up through CanadaHelps:  Yes  No Team Name: \_\_\_\_\_  
[if applicable]

Also, please indicate how you would like your sponsorships counted:  Individual OR  Team (via CanadaHelps)

**PLEASE PRINT CLEARLY AND PROVIDE FULL ADDRESS**

	Name	Address including City	Postal Code	Telephone Number	Email	Amount	Rec'd
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

	<b>Name</b>	<b>Address including City</b>	<b>Postal Code</b>	<b>Telephone Number</b>	<b>Email</b>	<b>Amount</b>	<b>Rec'd</b>
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							