



AUTISM RIDE
June 4, 2022

Pledges can also be collected online:
STAMANT.CA/RIDE

Participant: _____

Email: _____ Phone #: _____

** Single rider registration is FREE with \$100.00 or more in pledges. / Dual rider registration is FREE with \$150 or more in pledges.*

Name:		Address:		
Email:		City:	Postal Code:	
Pledge Amt:	Paid? <input type="checkbox"/>	Method of payment:	Cash: <input type="checkbox"/>	Cheque: <input type="checkbox"/>
Credit card #:	Signature:		Expiry date: ____ / ____	

Name:		Address:		
Email:		City:	Postal Code:	
Pledge Amt:	Paid? <input type="checkbox"/>	Method of payment:	Cash: <input type="checkbox"/>	Cheque: <input type="checkbox"/>
Credit card #:	Signature:		Expiry date: ____ / ____	

Name:		Address:		
Email:		City:	Postal Code:	
Pledge Amt:	Paid? <input type="checkbox"/>	Method of payment:	Cash: <input type="checkbox"/>	Cheque: <input type="checkbox"/>
Credit card #:	Signature:		Expiry date: ____ / ____	

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 before the event (440 River Road) or at the event.

Charitable Registration #: 123526915RR0001



Name:		Address:		
Email:		City:	Postal Code:	
Pledge:	Paid? <input type="checkbox"/>	Method of payment:	Cash: <input type="checkbox"/>	Cheque: <input type="checkbox"/>
Credit card #:		Signature:		Expiry date: ____ / ____

Name:		Address:		
Email:		City:	Email:	
Pledge:	Paid? <input type="checkbox"/>	Pledge:	Paid? <input type="checkbox"/>	Pledge:
Credit card #:		Signature:		Credit card #:

Name:		Address:		
Email:		City:	Email:	
Pledge:	Paid? <input type="checkbox"/>	Pledge:	Paid? <input type="checkbox"/>	Pledge:
Credit card #:		Signature:		Credit card #:

Name:		Address:		
Email:		City:	Email:	
Pledge:	Paid? <input type="checkbox"/>	Pledge:	Paid? <input type="checkbox"/>	Pledge:
Credit card #:		Signature:		Credit card #:

Send completed form to:
 St.Amant Foundation, 440 River Rd. Winnipeg, MB R2M3Z9
 or scan to: gsabourin@stamant.ca