Healthier Me Pledge form

I , _____, am a challenger in the WICWC ForMeForYou Challenge. My self-determined challenge is do my ultimate best to achieve the following for three months, thereby attaining a Healthier Me and helping current and future participants of the WICWC, who are living with cancer, to regain their health.

For three months, I will work to:

I will give up: _____

And replace it with: _____

My start date goal is: _____

I would really appreciate your support in the form of a pledge.

ALL proceeds will go DIRECTLY to the West Island Cancer Wellness Centre.

Pledge of $25 or more will be tax receipted – but you MUST PROVIDE ALL INFORMATION REQUIRED.

Full Name	Full address	Phone Number	email	Pledge

WICWC ForMeForYou Challenge Pledge Form

Full Name	Full address	Phone Number	email	Pledge
			TOTAL:	

* Pledges of $25 or more will receive a tax receipt IF all information is provided CLEARLY.
WICWC charitable number: 85521 2221 RR0001

All proceeds collected will benefit the West Island Cancer Wellness Centre in their initiatives to empower people who are encountering cancer by providing them with compassionate support and comprehensive information for mind, body, and spirit.