



Name: \_\_\_\_\_

Team Name (if applicable) \_\_\_\_\_

\* You can register for this event on line at [www.episcopalcharities.org](http://www.episcopalcharities.org) or contact us at (510) 844-0642 or [info@episcopalcharities.org](mailto:info@episcopalcharities.org) to receive a form by mail or fax.

Saturday, Oct. 7, 2006 • Grace Cathedral, 1100 California St., San Francisco • 7am Registration/Continental Breakfast • 8am Start

**SPONSOR SIGN-UP SHEET** Collect and turn in money from sponsors at time of registration. Episcopal Charities WILL NOT bill sponsors. Please make checks payable to Episcopal Charities.

THANK YOU for helping me reach my fundraising goal of \$_____!				
Name	Mailing Address (address, city, state, zip)	Phone/Email	Amount	Paid
1.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
2.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
3.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
4.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
5.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
6.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
7.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
8.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
9.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
10.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
11.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
12.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
<b>Amount raised through Active.com</b> (Please attach Active.com report of donations received)			\$	
<b>Amount received by Episcopal Charities from mail-in donations</b> (Leave blank if unknown)			\$	
<b>No. of Sponsors</b>		<b>Grand Total PAID</b>	\$	

Name: \_\_\_\_\_

**SPONSOR SIGN-UP SHEET Continued....** Collect and turn in money from sponsors at time of registration.  
 Episcopal Charities WILL NOT bill sponsors. Please make checks payable to Episcopal Charities.

THANK YOU for helping me reach my fundraising goal of \$_____!				
Name	Mailing Address (address, city, state, zip)	Phone/Email	Amount	Paid
13.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
14.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
15.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
16.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
17.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
18.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
19.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
20.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
21.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
22.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
23.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
24.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
25.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
26.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
27.				<input type="checkbox"/> Cash <input type="checkbox"/> Check
28.				<input type="checkbox"/> Cash <input type="checkbox"/> Check