

CATRA-Thon PLEDGE SHEET



Please circle everything you would like to do:

- WALK BICYCLE WHEELCHAIR
- TRICYCLE RIDE A HORSE
- CRITTER PARADE GOAT RACE
- BENEFIT PLEASURE RIDE, 9-11 AM

Name: _____

Phone: _____

	Sponsor	Address	Phone	Flat Donation	Total Collected
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					

Bring or send to CATRA, PO Box 339 (168 Station Road), Grantville, PA 17028, on the day of CATRA-Thon.

TOTAL:

RELEASE

In consideration of the CATRA-thon Committee's permission to participate in this special event, I hereby waive and release any and all rights and claims for damages which I may have against the Committee, the location at which the event will take place, as well as any other person connected with the event, their heirs, executors, successors, administrators and assigns for any and all injuries, personal or property damages or losses, which I may suffer for taking part in the event or as a result thereof.

Signature of Participant or Parent/Guardian (All participants under the age of 18 must be accompanied by a parent/guardian.)

Phone _____

DATE _____