Your Name: _____

___I'm walking or running in a team Team Name: _____

The 10th Annual Milford Trick or Trot Run/Walk is an in-person event! Run or Walk on October 30, 2021. Wear your favorite halloween costume, prizes will be awarded! This event benefits the Beth-El Center in Milford, CT. Please register at milfordtrickortrot.com and then ask family, friends, co-workers to sponsor you by making a donation. Use this form to fill in each donor's name, address, and the donation amount. All pledge money collected can be turned in to coordinator Maria Tomasetti.

Please make checks payable to either Milford Trick or Trot **or** Beth-El Center (*with Milford Trick or Trot in the Memo line*).

Please contact Maria Tomasetti, atomasetti@snet.net or 203-988-8598 if you have questions.

Donor Name	Address and Phone Number	Amount of Donation

Total _____

10th Annual Milford Trick or Trot
to benefit Beth-El Center in Milford, CT
October 30
Pledge Sheet for Faith Communities

Name: _____

Team Name: _____

Your Address: _____

_____

Phone (day): _____

Phone (evening): _____

Important Note: All participants must complete the Milford Trick or Trot Registration Form since it includes the waiver of liability. Thank you.