

YogaThon Pledge Form 2014



Founder and Survivor, Sierra



Bring yoga to children with cancer

Childhood Cancer Awareness Month September

First Name: _____ Last Name: _____

Parent's permission if under 18 _____

I am doing yoga in September to raise awareness and funds for **Childhood Cancer Kids**

I am participating in the non-profit **Childhood Cancer Kids** YogaThon. All proceeds will help fund yoga resources kits for children with cancer, develop a yoga video for children with cancer, help raise awareness about childhood cancer, and fund programs that help children with cancer. I will do my yoga at home or at _____ (studio) or both. You can sponsor me for:

I will hold _____ pose for _____ (minutes)

I will do _____ pose (see pose poster)

I will do _____ pose _____ times

I will do _____ hours or _____ days

Make checks out to **Childhood Cancer Kids** Thank you!

	Name of Sponsor and Address (Address for thank you letters and acknowledgements)	Pledge	Sponsor Phone	Sponsor E-mail	Amount Collected from Sponsor
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Participants:

Please mail this form by the end of Childhood Cancer Month, September 30th, 2014 to:

Childhood Cancer Kids, 26 Meeting House Lane, Madison Ct 06443. Attn: Treasurer

If you collect cash, please write a check for the total amount and mail it along with all other checks.