



MOVING MIRACLES
DANCE STUDIO

1st Annual Dance-A-Thon
Sunday, February 18, 2018, 12pm-6pm
 Michael's Catering & Banquets
 4885 Southwestern Blvd.
 Hamburg, NY 14075

Pledge Form

Participant Name _____ Phone Number _____ Corporate Match Partner _____

Address _____ City _____ State _____ Zip _____

Please support me at the Moving Miracles Dance-A-Thon which will help other dance students with Developmental Disabilities and Special Needs.

My goal is to raise _____, with a minimum requirement of \$50 by February 5, 2018 to secure my spot at the Dance-A-Thon on Sunday, February 18, 2018 from 12pm—6pm at Michael's Catering & Banquets.

Please be sure to include everyone's name and address if donors wish to receive a receipt of donation for tax-related purposes.

	Pledge \$5 \$10 \$15 \$20	Other	Friend's Name and Address Full name, street, city, state, zip	Total
1				
2				
3				
4				
5				
6				
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8				
9				
10				
11				
12				
13				
14				
15				

Thank you for you support!

If you have additional sponsors, please attach an additional form. All participants must return a signed pledge sheet and total funds collected by February 5, 2018 to Moving Miracles Dance to be registered to participate in the Dance-A-Thon. Please make checks payable to **sasi**.



Signature of Participant

Total Collected