



COMMITMENT FORM Please email completed form along with company logo and/or preferred recognition name to r.flanagan@hopehousehospice.com (or visit our website for online sponsorship form and credit card payment—www.hopehousehospice.com/hikeforhope)

Company/Name: _____

Contact: _____

Phone #: _____

Email: _____

Mailing Address: _____

City/Postal Code: _____

PLEASE INDICATE YOUR SPONSORSHIP LEVEL

Summit Hiker \$5,000

Day Hiker \$500

Scrambler \$2,500

Hitchhiker \$250

Backpacker \$1,000

Other

Contact r.flanagan@hopehousehospice.com to inquire about customizing sponsor levels.

PLEASE INDICATE YOUR METHOD OF PAYMENT

Cheque payable to Hope House Community Hospice mail to 350 Industrial Pkwy South Aurora, ON L4G 3V7

Invoice

Credit Card (Visa or MC) can be paid online www.hopehousehospice.com/hike