



2009 Official Pledge Form
www.MKidsTri.com or (952) 361-9600



TRIATHLETE'S NAME	ADDRESS (STREET, CITY, STATE, ZIP)	PHONE
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Hi. My name is _____. This summer I am entered to race in the MiracleKids Triathlon held in Minneapolis on July 18th and Chanhassen on August 15th. Besides training to get in great shape to race, I'll be swimming, biking and running for a kid with cancer. If you sponsor me in the race, together we will be supporting the Miracles of Mitch Foundation and your donation will go directly to help pay some of the household bills for Minnesota families during a child's cancer treatment.

My goal is to raise \$_____ in pledges.

Please make checks payable to **Miracles of Mitch Foundation**.

For gifts of \$100 or more, you will be sent a thank you card as a receipt for your tax-deductible donation.

SPONSOR NAME	ADDRESS (STREET, CITY, STATE, ZIP)	EMAIL	PLEDGE (\$)
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NOTE TO PARENTS: Donations should **NOT BE HELD MORE THAN 14 DAYS**. Please mail checks **ONLY** to:

THE MIRACLES OF MITCH FOUNDATION, 105 PEAVEY ROAD, SUITE 190, CHASKA, MN 55318

Further pledges may be turned in on both race days. To count for the 2009 contest, all pledges must be received by September 30, 2009.