Camp CaPella — Life experiences for people with disabilities. Memories for a lifetime

# Polar Plunge

**February 5, 2012**
**2:00 PM**

# Pledge Form

(Name) (Phone Number) (E-Mail Address)

(Address) (City) (State) (Zip Code)

**Please Print Legibly**

| NAME | Address | City | Zip | Phone | Donation |
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**Donations may be made by Checks or Cash. Please make checks payable to CAMP CAPELLA.**

**Total Amount Pledged on this sheet: $ _____**