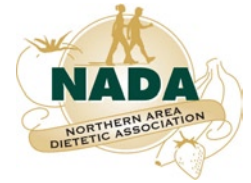


**Northern Area Dietetic Association**  
**Nutrition Fuels Fitness 5K/10K and Kids Fun Run**  
**PLEDGE FORM** *“Help us fight Childhood Obesity!”*



**Pledge Sheet Instructions**

1. **PRINT** all information.
2. **COLLECT** all pledges prior to race day.
3. **REPORT** your pledge status to the Nutrition Fuels Fitness Committee by March 15<sup>th</sup> so that your entry fee waiver can be determined. \*
4. **KEEP** a copy of this form for your records.
5. **SUBMIT** all pledge monies and this form to the Nutrition Fuels Fitness committee representative at the registration booth at the Nutrition Fuels Fitness event.
6. **THANK YOU** for collecting pledges and for helping us to “Fight Childhood Obesity”

**\*REPORTING YOUR STATUS:**

Contact the Northern Area Dietetic Association via phone or email @  
**(916) 688-6434    preston.june@yahoo.com    melindagong@yahoo.com**

Sponsor’s First and Last Name		Pledge Amt	Payment Method		Paid?
<b>Ex</b>	<b>Jane Doe</b>	<b>\$ 20.00</b>	<b>CASH</b>	<b>CHECK # 1502</b>	<b>Y or N</b>
1.		\$	CASH	CHECK # _____	Y or N
2.		\$	CASH	CHECK # _____	Y or N
3.		\$	CASH	CHECK # _____	Y or N
4.		\$	CASH	CHECK # _____	Y or N
5.		\$	CASH	CHECK # _____	Y or N
6.		\$	CASH	CHECK # _____	Y or N
7.		\$	CASH	CHECK # _____	Y or N
8.		\$	CASH	CHECK # _____	Y or N
9.		\$	CASH	CHECK # _____	Y or N
10.		\$	CASH	CHECK # _____	Y or N
11.		\$	CASH	CHECK # _____	Y or N
12.		\$	CASH	CHECK # _____	Y or N
13.		\$	CASH	CHECK # _____	Y or N
14.		\$	CASH	CHECK # _____	Y or N
15.		\$	CASH	CHECK # _____	Y or N

**Total Contributions:** \$

*Please make all checks payable to:*  
**NADA – Northern Area Dietetic Association**  
*All donations are 501(c)(3) tax deductible*

Enclosed is my check for cash received from sponsors.  
**Check Amt: \$**