

Penguin Plunge

Pledge Sheet

Special Olympics
Connecticut



Use this form to keep track of the money you collect from friends, family, co-workers & local businesses and as a tool to thank your supporters.

You do **not** need to turn this form in.

Team Name _____ Penguin Name _____

Address _____ City _____ State _____ Zip _____ Phone _____

NAME	ADDRESS OR EMAIL	PLEDGE AMOUNT	PD
Total			

Please make checks payable to:
"Special Olympics Connecticut" or "SOCT"

(Minimum \$100 per plunger)