



2018 PLEDGE AGREEMENT

Join us for our Sixth Annual Soul Stroll for Healthy Living 1K / 5K walk and fun fitness activities for the entire family. Your pledge benefits **YOUTH PROGRAMS & SCHOLARSHIP AWARDS** sponsored by Tempe Alumnae Chapter of Delta Sigma Theta Sorority, Inc. Each pledge level includes registration (entry into the event), Active Achiever pledge items, and any additional items associated with each category. **CHILDREN UNDER 12 ARE FREE.** Please select your pledge category.

<input type="checkbox"/> PREVENTION 365 \$500.00	<ul style="list-style-type: none"> ▲ Sling bag ▲ (3) Exercise Bands ▲ (3) Cooling Towels 	<ul style="list-style-type: none"> ▲ (3) Water Bottles ▲ (6) Door Prize Tickets ▲ (6) Registrations (Active Achiever)
<input type="checkbox"/> HEART HEALTHY \$250.00	<ul style="list-style-type: none"> ▲ Exercise Band ▲ (2) Cooling Towels ▲ (2) Water Bottles 	<ul style="list-style-type: none"> ▲ (4) Door Prize Tickets ▲ (4) Registrations (Active Achiever)
<input type="checkbox"/> FITNESS READY \$100.00	<ul style="list-style-type: none"> ▲ Cooling Towel ▲ Water Bottle ▲ (2) Door Prize Tickets 	<ul style="list-style-type: none"> ▲ (2) Registrations (Active Achiever)
<input type="checkbox"/> WELLNESS WINNER \$50.00	<ul style="list-style-type: none"> ▲ Water Bottle ▲ Door Prize Ticket ▲ Registration (Active Achiever) 	
<input type="checkbox"/> ACTIVE ACHIEVER \$20.00	<ul style="list-style-type: none"> ▲ T-shirt ▲ Carry Bag ▲ Wristband 	

\$ _____ **ENCLOSED**

Name: _____ Email Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Referred by: _____

Please print your contact information in the space above and return this pledge agreement by **APRIL 10, 2018** to

Delta Sigma Theta Sorority, Inc.
Tempe Alumnae Chapter
ATTN: Soul Stroll 2018
P.O. Box 25321
Tempe, AZ 85285-5321

If you have any questions regarding your pledge, please send an email to events@dsttempe.com. Please make your check or money order payable to **Tempe Alumnae Chapter of Delta Sigma Theta Sorority, Inc.**

FOR INTERNAL USE ONLY:

Form of Payment:	Received By:	Date Received:
------------------	--------------	----------------