



## 2025 Pledge Form

checks payable to

"Special Olympics of VT"

Brattleboro, VT  
October 4, 2025  
10 am  
Brattleboro Town

Walker's name: \_\_\_\_\_

Company/Team Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

### Sponsor

### Donation

Name _____	\$ _____
Name _____	\$ _____
Name _____	\$ _____
Name _____	\$ _____
Name _____	\$ _____
Name _____	\$ _____
Name _____	\$ _____
Name _____	\$ _____
Name _____	\$ _____
Name _____	\$ _____
Name _____	\$ _____
Name _____	\$ _____

PLEASE PHOTOCOPY THIS FORM AS NEEDED FOR OTHER TEAM MEMBERS

All tax-deductible contribution  
are payable to  
"Special Olympics VT"

Please bring this form and all  
pledges to the Buddy Walk on the  
day of the event.