*PLEASE FILL OUT ONE FORM FOR EACH CHILD IN EACH CLASS*

**STUDENT FIRST/LAST NAME** (PLEASE PRINT)**:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **GR:** \_\_\_\_\_\_ **TEACHER:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **SHEET** \_\_\_\_\_OF \_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **“Walking for Water”** | **ONLINE DONATION***FOR THIS CHILD* | **CASH GIVEN***NO TAX RECEIPT* | **CHEQUE GIVEN***TAX RECEIPT* | **SUBMITTED** | OFFICE USE ONLY |
| **PRINTED NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **ADDRESS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **CITY:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PROV\_\_\_\_\_\_\_\_\_\_ **PB PARISH?** YES OR NO |  |  |  |  |  |
| **PRINTED NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **ADDRESS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **CITY:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PROV\_\_\_\_\_\_\_\_\_\_ **PB PARISH?** YES OR NO |  |  |  |  |  |
| **PRINTED NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **ADDRESS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **CITY:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PROV\_\_\_\_\_\_\_\_\_\_ **PB PARISH?** YES OR NO |  |  |  |  |  |
| **PRINTED NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **ADDRESS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **CITY:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PROV\_\_\_\_\_\_\_\_\_\_ **PB PARISH?** YES OR NO |  |  |  |  |  |
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| **PRINTED NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **ADDRESS:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **CITY:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PROV\_\_\_\_\_\_\_\_\_\_ **PB PARISH?** YES OR NO |  |  |  |  |  |
|  | **TOTAL** (THIS SHEET ONLY) \_\_\_\_\_\_\_\_\_\_\_\_\_\_**GRAND TOTAL** (ALL SHEETS) \_\_\_\_\_\_\_\_\_\_\_ | **TOTAL RECEIVED** \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |