

Bank Night Team Captain's Checklist and Collection Form



Please complete this form and bring with you to Bank Night
On Wednesday, September 26th at the TC SPCA.

Team Name: _____

Team Captain's Name: _____

Phone: (____) _____ Email _____

Our Goal is To Raise \$ _____

Team Member's Name	Registration Fee Paid <small>\$10 per Team Member</small>	T-shirt Size	Donation Form & Envelope Received	Waiver Signed	Amount Raised
Ima Dog Lover	\$10	M	v	v	\$150
1.	\$				\$
2.	\$				\$
3.	\$				\$
4.	\$				\$
5.	\$				\$
6.	\$				\$
7.	\$				\$
8.	\$				\$
9.	\$				\$
10.	\$				\$
11.	\$				\$
12.	\$				\$
13.	\$				\$
14.	\$				\$
Total Registration:	\$		Total Team Support	\$	

