# PASA Monster Swim PLEDGE SHEET

**Name: _____ Coach Name: _____**

**My goal is to swim _____ laps. I swam _____ laps.**

**Donations will benefit PASA-Rinconada. All contributions are tax deductible (Tax ID #94-1549738). Please make checks payable to Palo Alto Swim Club.**

| Sponsor Name | Flat Donation Amount | Pledge Per Lap | Company Match |
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