



PLEDGE FORM: 43RD ANNUAL 'JOANNE PERLICH RIDE4DREAMS'

Saturday September 12th/2026 at PAVAN PARK, Lethbridge



- Please make cheques payable to *Lethbridge Therapeutic Riding Association (LTRA)*
 - Tax receipts issued for amounts pledged \$20 or greater

Participant's Name: _____ Phone: _____ ☐ Adult (18 & older) | ☐ Youth (17 & under) | ☐ Non-Rider

Email: _____ Address: _____ Postal Code: _____

- **Riders** are required to collect and submit a minimum of \$200.00 in pledges to receive complementary passes to the “Ride4Dreams Cabaret’ event occurring on **September 11th/2026**.
- **IMPORTANT:** If you are planning on attending the Cabaret Event, please RSVP to Ryleigh@ltra.ca at your earliest convenience.
- Completed pledge forms can be dropped off to LTRA or emailed to office@ltra.ca

Name (Please Print)	Address/Postal Code This is Required for Tax Receipts	Phone	Email	Amount Pledged	\$ Paid Previously to LTRA	Amount Attached
Sub Total this side				\$	\$	\$
Sub Total 2nd side				\$	\$	\$
TOTAL PLEDGES				\$	\$	\$

Please Note: The “\$ Paid Previously to LTRA” amounts will be sent to each rider prior to the due date from the LTRA Office.

Name (please print)	Address/Postal Code This is Required for Tax Receipts	Phone	Email	Amount Pledged	\$ Paid Previously to LTRA	Amount Attached
Sub Total (Transfer total to page 1)				\$	\$	\$

Please Note: The "\$ Paid Previously to LTRA" amounts will be sent to each rider prior to the due date from the LTRA Office.

DETAILS FOR DONORS

We value transparency and as a potential participant, sponsor and/or donor, we want to ensure you have all the necessary information to make an informed decision:

1. **Name of Charitable Organization:** Lethbridge Therapeutic Riding Association
2. **Cost of Fundraising:** Based upon last years' totals and the dedicated work of our volunteer task force, we anticipate that we will raise approx. 125k from Ride4Dreams at a cost of 27k.
3. **Contact Information:** For more information, you can contact Kale Hayes, our Executive Director at [\(403\) 328-2165](tel:4033282165) or via email at: kale@ltra.ca
4. **Address:** Our main office is located at: 24 205015 Hwy 512. Lethbridge County and our place of incorporation is Lethbridge County, Alberta.

How Donations/Pledges Are Used: The support of our community tremendously aid in the costs associated with the delivery of our therapeutic and equine wellness programming, acquiring needed supplies and equipment, maintaining our facility, and providing care for our animals that are utilized in the delivery of our therapeutic services and inclusive recreational programming.

THANK YOU FOR SUPPORTING THE LETHBRIDGE THERAPEUTIC RIDING ASSOCIATION!