

# GLOBAL WHEELCHAIR MISSION REPORT FORM

## “WHEELCHAIR SUNDAY” PARISH DRIVE

*A very effective and successful program to: 1) Raise funding for the delivery of life-changing wheelchairs, 2) Increase awareness of the charitable works by the Knights of Columbus, and 3) Inspire men to proudly join the Knights of Columbus.*

Our Council has conducted a “Wheelchair Sunday”

The total amount of donations received during the weekend? \$ \_\_\_\_\_

How many new members were inspired to join your Council as a result of the presentation? \_\_\_\_\_

If your council would like information on how to conduct a “Wheelchair Sunday” please review the “Wheelchair Sunday” video and Handbook by visiting the Knights of Columbus section at: [www.amwheelchair.org](http://www.amwheelchair.org) or [www.cdnwheelchair.ca](http://www.cdnwheelchair.ca)

## OTHER FUNDRAISING ACTIVITIES FOR THE GLOBAL WHEELCHAIR MISSION

*Briefly describe any other activities your Council did this year to raise funds for the American Wheelchair Mission or Canadian Wheelchair Foundation (e.g.: Pancake Breakfasts, Car Wash, Dinner/Dance, etc.)*

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Total amount of dollars raised during other fundraising activities: \$ \_\_\_\_\_

Total amount of man-hours spent to raise funds this year: \_\_\_\_\_

Total amount of donations to the Global Wheelchair Mission this year: \$ \_\_\_\_\_

Council Number \_\_\_\_\_ Location \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Date: \_\_\_\_\_ (Signed) \_\_\_\_\_ (Grand Knight)

(Signed) \_\_\_\_\_ (Financial Secretary)



Email a copy of this document to: [fraternalmission@kofc.org](mailto:fraternalmission@kofc.org)  
(Councils should also retain a copy of this completed form for their files)