

PURPLESTRIDE ROCHESTER 2012

SEPTEMBER 22 · ROCHESTER COMMUNITY TECHNICAL COLLEGE



DONATION FORM

You can also donate online safely and securely at www.purplestride.org/rochester

PARTICIPANT NAME _____

DONATION AMOUNT

\$25 \$50 \$100 \$250 \$500 Other \$ _____

PAYMENT METHOD

CHECK Make checks payable to Pancreatic Cancer Action Network and include participant and event names.

CREDIT CARD

Please select one: VISA MC AmEx Disc

Card # (required) _____

Exp. Date (required) _____ CID# _____

Name as it appears on card _____

Signature _____ Date _____

CASH

Optional dedication text for display on participant's fundraising page:

From _____

In Honor Of In Memory Of In Support Of

Honoree's name _____

I wish to be listed as Anonymous

Please do not display my donation amount

DONOR INFORMATION

First Name _____ Last Name _____

Street Address _____

City _____ State _____ Zip Code _____

Tel _____ E-mail _____

PLEASE MAIL COMPLETED FORM AND DONATION TO:

Pancreatic Cancer Action Network ATTN: PurpleStride Rochester
1500 Rosecrans Avenue, Suite 200, Manhattan Beach, CA 90266