Walk For Hope	<u>www.</u>									
_	ER INFORMATION			WALKER INSTRUCTIONS						
Date:	First Name:				1. START NOW to sign up donors.					
	Last Name:				2. PRINT all information					
	Address:				3. MAKE CHECKS PAYABLE to:					
Place:	City:	City:, State: Zip:				4. WRITE your name and on all checks.				
	Phone:		_ Email:	· · · · · · · · · · · · · · · · · · ·	5. SEND in donations & pledge sheet or BRING them to walk.					
		Team Name:			6. KEEP IN MIND: Only donations received by pm on					
	Gender	r: □ Male □ Female	Date of Birth:	_//		will be consi	dered for fu	Indraising a	awards.	
Donor's Full Name		Home	Address	City, Sta	te & Zip Code	Phone Number	Cash Donation Amount	Check Donation Amount	Amount Paid	
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9.										
10.										
11.										
12.										
13.										
14.										
15.										

Important Instructions for Donors: Please PRINT your name, clearly to receive a gift receipt. You may wish to give your donat make checks payable to:				
participant you are supporting in the memo section of all the checks. If preferred, visit				
www.	to make a donation online.			

SEND ALL DONATIONS & PLEDGE SHEET TO:

Total	~
Paid	\$

Attn: _____

Address: _____