

PURPLESTRIDE

DONATION FORM

EVENT NAME*

*If the event name is not included, this donation will be credited as a general contribution to the Pancreatic Cancer Action Network, and will not be attributed to any PurpleStride event, team or participant.

DONATING TO

- ☐ Please credit my donation to the fundraising efforts of (insert participating individual or team name):

OR

- ☐ This is a general event donation.

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

From _____

☐ In Honor Of ☐ In Memory Of Honoree's name: _____

- ☐ I wish to be listed as Anonymous

- ☐ Please do not display my donation amount

DONATION AMOUNT

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

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 _____

Billing Address (if different from below): _____

Signature _____ Date _____

- ☐ **CASH**

DONOR INFORMATION

First Name _____ Last Name _____

Street Address _____

City _____ State _____ Zip Code _____

Tel _____ E-mail _____

Employer (optional for demographic purposes only) _____

PLEASE MAIL COMPLETED FORM AND DONATION TO:

Pancreatic Cancer Action Network, 1500 Rosecrans Avenue, Suite 200, Manhattan Beach, CA 90266