## WALK FOR LIFE – SPONSOR PLEDGE FORM

Team\_\_\_\_\_Church/Org\_\_\_

1.Total Pledged 2. Total Paid

WALK FOR LIFE - SPONSOR PLEDGE FORM	2 Perlman Dr. Suite LL9, Spr	<u>ing Valley, NY 10977</u> Phone 845-352-610
Walker's Name	PLEASE BRING THIS PL	EDGE FORM & ANY ONLINE FORMS WITH YOU
	TO THE WALK SITE (	ON WALK DAY (OR MAIL TO ABOVE ADDRESS)
Address	PhonePhone	FOR ACCOUNTING PURPOSES ONLY
City StateZip Email		Your Fund-raising Goal: \$

		3. Total Raised: (1+2	2):	
If "Bill Me Later", Address is Required Make Checks Payable to:	<b>Care Net Pregnancy Center</b>	of Rockland Ple	ase PRINT clearly	
This is a single, tax-deductible donation – NOT a per-mile pledge. Need more info? Visit walkforliferockland.org for tips and FAQs				
Nama Dhana	Name	Dhana		
NamePhone	Name			
Address	Address	State	7in	
E-mailStateZip	E-mail	State	Zip	
(to opt-in to e-mail communication)	(to opt-in to e-mail communication)	)		
□ Paid Cash □ Check □ Paid Online □ Bill me later □\$25 □\$50 □\$75 □\$100 □ Other	□Paid Cash □Check □Paid Onl			
NamePhone	Name	Phone		
Address	Address	Ctata	7in	
GityStateZip	City	State	ZIP	
E-mail(to opt-in to e-mail communication)	E-mail_ (to opt-in to e-mail communication)	]		
(to opt in to a mail communication)	(to opt in to o mail communication)	/		
Paid Cash □Check □Paid Online □ Bill me later □\$25 □\$50 □\$75 □\$100 □ Other	□Paid Cash □Check □Paid Onl	ine □Bill me later □\$25 □	1\$50 □\$75 □\$100 □ Other	
Name Phone	Name			
Address	Address			
CityZip	City	State	Zip	
E-mail	E-mail			
(to opt-in to e-mail communication)	(to opt-in to e-mail communication,	)		
□Paid Cash □Check □Paid Online □Bill me later □\$25 □\$50 □\$75 □\$100□ Other	□Paid Cash □Check □Paid Onl	ine □Bill me later □\$25 □	\$50 <b>□</b> \$75 <b>□</b> \$100 <b>□</b> Other	
Name Phone	Name	Phone		
Address	Address			
CityStateZip	City	State	Zip	
E-mail	E-mail			
(to opt-in to e-mail communication)	(to opt-in to e-mail communication,	)		
□Paid Cash □Check □Paid Online □Bill me later □\$25 □\$50 □\$75 □\$100 □Other	□Paid Cash □Check □Paid Onl	ine □Bill me later □\$25 □	\$50 <b>□</b> \$75 <b>□</b> \$100 <b>□</b> Other	
NamePhone	Name	Phone		
Address	Address			
CityZip	City	State	Zip	
E-mail	E-mail			
(to opt-in to e-mail communication)	(to opt-in to e-mail communication,	)		
□Paid Cash □Check □Paid Online □Bill me later □\$25 □\$50 □\$75 □\$100 □Other	□Paid Cash □Check □Paid Onl	ine □Bill me later □\$25 □	1\$50 <b>□</b> \$75 <b>□</b> \$100 <b>□</b> Other	
Name Phone	Name	Phone		
Address	Address			
CityZip	City	State	Zip	
E-mail	E-mail			
(to opt-in to e-mail communication)	(to opt-in to e-mail communication,	)		
□ Paid Cash □ Check □Paid Online □ Bill me later □\$25 □\$50 □\$75 □\$100 □	☐ Paid Cash ☐ Check ☐ Paid Or	nline ☐ Bill me later ☐\$25	□\$50 □\$75 □\$100 □	
NamePhone	Name	Phone		
Address	Address			
CityStateZip	City	State	Zip	
E-mail	E-mail			
(to opt-in to e-mail communication)	(to opt-in to e-mail communication,	)		
□Paid Cash □Check □Paid Online □Bill me later □\$25 □\$50 □\$75 □\$100 □Other	□Paid Cash □Check □Paid Onl	ine □Bill me later □\$25 □	\$50 □\$75 □\$100 □ Other	