

Pledge Form - EVANSVILLE



Family & Pet Walk

Registration - 1:00 pm ~ Step-off - 2:00 pm ~ Ceremony - 3:00 pm



I am walking in support of Name of Organization and/or Person

First Name _____ Last Name _____
 Team Name (if applicable) _____ Team Captain's Name _____ State _____ Zip _____
 Address _____ City _____
 Phone _____ E-mail _____

List Sponsors Below (Please fill-in your information below along with payment choice)			
Sponsor Name	Cash (X)	Check #	Online Pledge (X) Amount
1. My own pledge is			
2.			
3.			
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18.			
19.			
20.			
BRING THIS FORM TO THE WALK! RAIN OR SHINE			
All contributions are tax deductible. Make checks payable to your selected non-profit			Total:
<small>In consideration of the acknowledgement of our purpose and the honor of our organization's participation in this event, we are pleased to assign to you, the individual whose name appears on this form, the right to use the name of our organization for promotional purposes. If you have any questions, please contact the Evansville Guardian's office at 317-426-6666 or by email at guardian@evansville.com. We are not responsible for the loss of this form. Please bring this form to the walk on the day of the walk. If you are unable to bring this form to the walk, please bring a copy of this form to the walk on the day of the walk. If you are unable to bring this form to the walk, please bring a copy of this form to the walk on the day of the walk.</small>			

Walker Signature: _____ Parent/Guardian Signature (for walkers under 18 years of age)

If you cannot attend the walk, mail this form and pledges to the selected non-profit or donate online.

Visit WalkingForDreams.org to learn about the non-profits!