



ALS UNITED WALK DONATION FORM

Please have donors prepay with checks payable to: **“ALS United Mid-Atlantic.”** Contributions are tax-deductible. Thank-you letters are sent to the address listed, so make sure it’s correct! Have donors write your name and team in the memo portion of the check. Please print legibly.

Please send this slip and your donations to:
ALS United Mid-Atlantic, 1015 Virginia Drive, Suite 110, Fort Washington, PA 19034

PARTICIPANT’S NAME _____

TEAM NAME _____

WALK LOCATION _____

DONOR’S FULL NAME _____

DONOR’S ADDRESS _____ APT # _____

CITY _____ STATE _____ ZIP _____

PHONE NUMBER _____

EMAIL _____

DONATION AMOUNT: \$ _____

NOTES: _____

FOR OFFICE USE ONLY

CHECKS \$ _____ CASH \$ _____ AMOUNT ENCLOSED \$ _____

RECEIVED BY _____ ENTERED IN LUMINATE BY _____