MAIL- IN DONATION FORM



Thank you for supporting me as I participate in the

Tulsa Walk

Participant Name: Darla Gardner

Participant ID: 7115791

Team Name: In Memory of Jeannie Ann Dobbs

STEP 1. PRINT BILLING INFORMATION

First Name:	_ Last Name:	
Address:		
City:	_ State: Zip:	
Phone:	Email (optional):	
Address is different	than one on check. Please use above address.	
STEP 2. SELECT DONATION DETAILS		
	○ \$50 ○ \$25 ○ Other \$	
○ Cash		
Check #, made payabl	e to: The ALS Association	
Credit card #	//	
Signature		
Name for Participant's Donation Scroll (ex: The Smith Family or Aunt Sue):		
STEP 3. MAIL IT IN		
Please only attach one donation per form. Send this form with your donation to:		
The ALS Association Sharon Catalano - Oklaho Attn: Walk to Defeat ALS P.O. Box 14482	oma Service Area	

Tulsa, OK 74159

Please note that it may take up to 2 weeks to post your donation online.

For Office Use Only:		
	Check \$	Cash \$
Received by		Entered in Luminate by

