

TeamRaiser Gift Form

Name:

Address:

City:

State:

Zip:

Country:

E-mail:

Donation Amount: ☐ \$10 ☐ \$25 ☐ \$50
 ☐ Other amount:

Credit Card Information

☐ MasterCard ☐ Visa ☐ American Express

Card Number:

Expiration Date: **Month:** **Year:**

I am sponsoring the following person who is participating in this event:

Event Name: Fundraise Your Way
Participation Type: Fundraiser - Join

Participant Name: Jarrod Brissenden
Address: 109 Tacoma

City: Highland
State: IL
Zip: 62249-4887
Country: United States
E-mail: jarrod@brissendenfinancial.com
Race Number:
Cons Id: 1126398

Team Name: World Record Baseball Game
Company:
Division:

Team Captain: Mr. Chuck Williams
Address: 1602 Vintage Ridge Court

City: Wildwood
State: MO
Zip: 63038-1487
Country:
E-mail: chuckwilliams47@gmail.com