

Be part of the *Miracle*

Thank you for supporting the Miracle Mile Walk benefiting the Randy W. Cooper, M.D., Center for Breast Health Services and the Women's Wellness on Wheels mobile unit, which provide lifesaving screenings to women in our community regardless of their ability to pay!



How to get involved

REGISTER ONLINE & FUNDRAISE

Visit TheMiracleMileWalk.org to register as a participant and create or join a team. Encourage your friends and family to join your team and donate!

FUNDRAISE ON FACEBOOK

Once you have registered online, connect your fundraising page to your personal Facebook account. Invite friends and family to join your team and donate towards your fundraising efforts.

SHOW UP

Walk in honor or in memory of those touched by breast cancer. Invite your friends and family and join us on Saturday, Oct. 15, at the Augusta Common. The pre-walk program begins at 8 a.m.

DESIGN A T-SHIRT

Submit your original design to foundation@uh.org by Oct. 1 to be entered into the T-shirt contest. The winner will be announced at the Miracle Mile Walk on Oct. 15.

LIKE AND FOLLOW

Like and follow the Official Miracle Mile Walk Facebook Page and Instagram @MiracleMileWalk!

Donations can be mailed to Piedmont Augusta Foundation, dropped off on T-Shirt pick up day on Thursday, Oct. 13, from 9 a.m. - 6 p.m., or turned in on the day of the walk at the Donation Drop-Off table. **Participants who raise \$100 or more for the Miracle Mile Walk receive one free T-shirt.**



OCTOBER 15, 2022

Donation Form



DONOR INFORMATION



Name _____

Billing Address _____

City _____ State _____ ZIP _____

Phone _____

Email _____

DONATION AMOUNT



I would like to make a contribution to help Piedmont Augusta Foundation's Miracle Mile Walk.

\$250 \$100 \$50 \$25 Other _____

A check is enclosed (Made payable to Piedmont Augusta Foundation).

Want to donate online? Visit TheMiracleMileWalk.org to register and make your gift.

Charge my credit card VISA MasterCard AMEX Discover

Card # _____ Exp. Date _____

Name on card _____ CVV# _____

Address _____ City _____ State _____ ZIP _____

PARTICIPATION INFORMATION



Supporting a team or individual is easy! Complete the information below so your donation can be credited to the participant or team goal!

Participant's Name _____

Team Name _____

Mail this completed form and your payment to:



Piedmont Augusta Foundation • 2260 Wrightsboro Road • Augusta, GA 30904
For more information, call 706.667.0030 or email foundation@uh.org.