

Tour de Park - September 11, 2010 - Official Donation Form

Fundraiser's Name _____

Age _____

page ____ of ____

#	NAME	ADDRESS	CITY	STATE	ZIP	PHONE	DONATED AMOUNT
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
						TOTAL DONATIONS:	\$

Please turn this form in with your money raised at registration on Sept 11, 2010.

Cash, Online Credit Card donations and Checks made out to MIHI, Inc accepted

Questions? Contact - Lynn Deibert 240-520-0333 or projectlifesaver@mihi.org