| Walker Information | n- Adult/Youth O Child | (12 or under) | | / | | |
|---|-------------------------------|----------------|--------------|-----------------|------------------------|--|
| Name | | , | Family Reson | rce Center of 2 | Zion | |
| | | | savin | g Babie | r | |
| City | State | Zip | · | Ď, | í. | |
| Phone | Email | | Servin | g Familie | 5 | |
| | | | Walk | For Lif | ^F e | |
| Starts at Lakeview Church ~ 1821 Sheridan Rd Zion, IL 60099 Early Registration May 13-16 at FRCZ from 10am – 4pm (free gift to first 25!) | | | May 18, 2019 | | | |
| _unj nogionano | P. 847-731-8370 ~~ www.FRCZio | | Registrati | on 8:3 | 80 am | |
| | PLEDGI | E FORM **PRINT | CI FARI Y** | | | |
| □ Email I | Receipt | | | Pledge A | Amount | |
| Name | | Email: | CASH | Check* | Bill Me (Min. \$10) | |
| Address | | City | | | | |
| State | Zip | Phone | | | | |
| □ Email I | Receipt | | | | | |
| Name | • | Email: | CASH | Check* | Bill Me (Min. \$10) | |
| Address | | City | | | | |
| State | Zip | Phone | | | | |
| □ Email I | Receipt | , | , | | • | |
| Name | • | Email: | CASH | Check* | Bill Me (Min. \$10) | |

Email Receipt

Address

State

| Name | | Email: | CASH | Check* | Bill Me (Min. \$10) |
|---------|-----|--------|------|--------|------------------------|
| Address | | City | | | |
| State | Zip | Phone | | | |

City

Phone

Please print all information for each pleage \cdot Collect Cash & Check pleages and turn in at the Walk for Life event.

Receive a FREE T-shirt with \$75.00 in pledges!

Zip



| T-Shirt(s)- | |
|------------------|--|
| Water Bottle(s)- | |

| | CASH | Check* | Bill Me | |
|--|------|--------|---------|--|
| Total Front | | | | |
| Total Back | | | | |
| *Make checks payable to Family Resource Center of Zion | | | | |

ADDITIONAL PLEDGES **Print CLEARLY**

| | Email Receipt | | | Ent | er Pledge | Amount |
|---------|---------------|-----|--------|------|-----------|-------------------------|
| Name | | | Email: | CASH | Check* | Bill Me (Min. \$10) |
| Address | | | City | | | |
| State | | Zip | Phone | | | |
| | Email Receipt | | | | | |
| Name | | | Email: | CASH | Check* | Bill Me (Min. \$10) |
| Address | | | City | | | |
| State | | Zip | Phone | | | |
| | Email Receipt | | | | | |
| Name | | | Email: | CASH | Check* | Bill Me (Min. \$10) |
| Address | | | City | | | |
| State | | Zip | Phone | | | |
| | Email Receipt | | | | | |
| Name | | | Email: | CASH | Check* | Bill Me (Min. \$10) |
| Address | | | City | | | , |
| State | | Zip | Phone | | | |
| | Email Receipt | | | | | |
| Name | | | Email: | CASH | Check* | Bill Me (Min. \$10) |
| Address | | | City | | | |
| State | | Zip | Phone | | | |
| | Email Receipt | | | | | |
| Name | | | Email: | CASH | Check* | Bill Me (Min. \$10) |
| Address | | | City | | | |
| State | | Zip | Phone | | | |
| | Email Receipt | | | | | |
| Name | | | Email: | CASH | Check* | Bill Me (Min.\$10) |
| Address | | | City | | | , , , |
| State | | Zip | Phone | | | |

*Make checks payable to Family Resource Center of Zion