

Walk For Love of...

Donation / Pledge Form



Student Name: _____ Grade: _____

Donor Name	Type of Donation	Form of Payment <i>(Checks payable to FCA)</i>	Amount
	<input type="checkbox"/> Flat Donation <input type="checkbox"/> Pledge of _____ per mile	<input type="checkbox"/> Cash <input type="checkbox"/> Check # _____	
	<input type="checkbox"/> Flat Donation <input type="checkbox"/> Pledge of _____ per mile	<input type="checkbox"/> Cash <input type="checkbox"/> Check # _____	
	<input type="checkbox"/> Flat Donation <input type="checkbox"/> Pledge of _____ per mile	<input type="checkbox"/> Cash <input type="checkbox"/> Check # _____	
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