



Saturday, August 7, 2010

For more information, go to www.ihavewings.org

First Name: _____

Last Name: _____

I am participating Better Bodies/IHW Walk-A-Thon. All funds will help I Have Wings fulfill their mission in our local community. I plan to walk at least _____ laps.

Please sponsor me per lap or a max amount. 4 laps = 1 mile

Please make checks payable to:

I Have Wings Breast Cancer Foundation. All donations are tax deductible.

Thank you!

	Name of Sponsor	Pledge per lap (Example: \$1)	Max. Pledge	Amt. Collected
1				
2				
3				
4				
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6				
7				
8				
9				
10				
11				
12				
13				
14				
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16				
17				
18				
19				
20				

Participants:

To help us reach our goal, we hope that each participant finds 10 sponsors

Please bring form and money to registration at Dixie HS on the walkathon day, Sat. Aug 7, 2010.

Please print clearly