

Pledge/Donation Form

There is no minimum donation.
All donations are tax deductible and on a one time basis.
Checks payable to Everhart Primary Health Care



FUNds Day!

Saturday, October 25, 2014

9 a.m. - Registration & Activities

10 a.m. - 5k Walk/Fun Run (*Non-timed event*)

- Registration & Waivers are due the day of the event -

ALL DONATIONS are due the day of the event



Participant (Please print) : _____ Phone: _____

Name (First & Last)	Street Address City & State, Zip	Phone	Email Address	Receipt Required? Email, Mail, or No	Donation Amount Cash or Check
<i>Example</i> John Smith	999 Anywhere Drive Anywhere, NC 99999	000-000-000	anyperson@gmail.com	Email	\$30.00 Check No. 9999

Office Use Only:

Subtotal Donations: Pg 1 _____ / Pg 2 _____ = Total _____

Receipt: At event _____ / Emailed date _____ / Mailed date _____

Name (First & Last)	Street Address City & State, Zip	Phone	Email Address	Receipt Required? Email or Mail	Donation Amount Cash or Check

Total Page 2: \$ _____

Office Use Only: Subtotal Donations: Pg 2 \$ _____