



No Ordinary Walk in the Park

www.li2daywalk.org

2010

DONATION FORM

PARTICIPANT INFORMATION

Walker's Name: _____

Walker's LI2DAY ID#: _____

YOUR INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: (____) _____ Evening Phone: (____) _____

Email address: _____

DONATION DETAILS

Donation Amount:

\$500 \$250 \$100 \$75 Other \$ _____

(All donations are tax deductible where allowed by law.)

- Secure Tax Deductible Donations by Credit Card can be made online by visiting:
www.li2daywalk.org/donation.asp
- 100% of your donation will be given to the 2010 LI2DAY Beneficiary Organizations.
For a complete list of the organizations please visit:
www.li2daywalk.org/beneficiaries.asp

SUBMISSION INSTRUCTIONS

Please make all checks payable to: LI2DAYBCW (No Cash, Please!)

Mail donation, along with this completed form, to:

LI2DAYBCW
P.O. Box 5743
Hicksville, New York 11802-5743