



WALK FOR HOPE

SUNDAY, APRIL 29, 2018

OFFLINE DONATION FORM: FOR CHECKS AND MONEY ORDERS

Please make checks payable to the CHOP Foundation and mail, along with this form, to:
 CHOP Foundation • Walk for Hope • P.O. Box 781352 • Philadelphia, PA 19178-1352

Participant Name _____

Team Name _____

Mailing Address _____

City _____ State _____ ZIP _____

WHO DONATED TO YOU? (FIRST AND LAST NAME)	WHAT IS THEIR MAILING ADDRESS? (TO SEND A TAX RECEIPT)	DONATION AMOUNT	AMOUNT ADDED ONLINE? *
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

* TRACK DONATIONS ONLINE AT CHOPWALKFORHOPE.ORG

If you'd like to include these donations on your online fundraising page, please log on to chopwalkforhope.org to access your dashboard and manually add the offline donation.

To remove your name from our fundraising mailing list, please visit giving.chop.edu/optout or call 267-426-5332.

©2018 The Children's Hospital of Philadelphia • 18DEV1377/NP/1-18

