

ON WALK DAY:

1. Bring this pledge form only if you have Sponsors not recorded on your Walker Webpage.

2. Bring your printed Sponsor List from your Walker Webpage. 3. Bring any money given to you by Sponsors.

Walker's Church:	Wa	lker's Name:	ame:				Phone:		
Address:	City:	St:	Zip		Ema	ail:			
	yable to: A V	to: A Woman's Choice							
First	Last	First				Last			
Address		Address							
City	State Zip	City				State	Zip		
Phone #		Phone #							
Email		Email							
\$25 \$50 \$75 \$100 Other_	BILL MEPAID (Cash	Check) \$25 \$5	0 \$75	\$100	Other	BILL ME	PAID (Cash	_Check)	
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Address	•	Address							
City	State Zip	City				State	Zip		
Phone #	•	Phone #							
Email		Email							
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\$25 \$50 \$75 \$100 Other_	BILL MEPAID (Cash	_Check) \$25 \$	50 \$75	\$100	Other	BILL ME	PAID (Cash _	Check)	

A Woman's Choice 1234 E. Lime Street, Lakeland, FL 33801 863-683-2341

