

5th ANNUAL - SAM'S WALK FOR DREAMS

*In Memory of Sam Wright
To Benefit*



Sunday, September 26, 2010

Wason Pond Recreation Area, Chester, NH

Rain or Shine

SPONSORSHIP FORM

Walker's Name: _____

Walker's Address & Phone #: _____

This pledge sheet will help you keep track of your sponsors. Ask friends, family, co-workers, neighbors and local companies to sponsor you \$5, \$10, \$15 or as much as they like for the walk. Please ask them to fill out the information below. As your sponsors pay, be sure to indicate it on the form. All checks should be made out to Sam's Walk for Dreams. All contributions are tax deductible. Tax ID # 74-3184881.

	Name	Address, City, State & Zip Code	Phone #	Amount Pledged	Amount Collected	✓ for Cash	✓ for Check
1							
2							
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22							
23							
24							

TOTAL \$

Please write clearly and ensure that all information is complete.
Hand in sponsorship form and pledges on the day of the walk at a designated sponsorship collection point.

Thank you for helping Sam's Walk for Dreams. Your support is greatly appreciated.
For more information, please contact Amy Maglia at 978-852-8773 or visit our website at www.samswalk.com