



Donation Form

Enclosed is my contribution in the amount of: \$ _____

(Please make checks payable to:
Parkinson's Unity Walk)

YOUR NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TEL _____

E-MAIL _____

List my name as Anonymous on public participant/team page

DOUBLE YOUR DONATION! Ask your employer if they have a matching gifts program.

My donation is in Support of Walker or Team: _____

OR

This is a gift in Loving Memory Of: _____

This is a gift in Honor of: _____

Please send an acknowledgement card of my donation to (Honoree or Family of deceased):

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

Please do not add me to your mailing list.

Please do not add me to your email list

Mail donation to: Parkinson's Unity Walk, P.O. Box 275, Kingston, NJ 08528

To donate securely by credit card visit: www.unitywalk.org or call toll free: 1-866-PUW-WALK (789-9255)

Parkinson's Unity Walk is a 501 (c)(3) non-profit organization. Contributions are tax-deductible.