



2010

Race for Life



Sponsor Pledge Form

Please consider sponsoring me in my participation in this year's Race for Life benefiting the Pregnancy Help Center of Lufkin. The proceeds of this event will go toward the purchase of a brand new ultrasound machine; which will be used to provide **FREE** ultrasounds to low income pregnant women. Our hope is that by verifying the presence of heartbeat and by introducing mom and baby for the first time, women facing an unexpected or difficult pregnancy will choose life for their unborn baby.

Your support is greatly appreciated.

Participant's Name: _____

Parent's Name (if minor child): _____

Address: _____ Phone: () _____ - _____

City: _____ State: _____ Zip: _____

Participating in honor memory of: _____

Please clearly print all information, indicate the total pledge and method of payment. We would appreciate pledges being pre-paid!
Checks should be made out to: **Pregnancy Help Center of Lufkin.**

ALL GIFTS ARE TAX-DEDUCTIBLE.

First Last

Address

City St. Zip

\$15 \$25 \$50 \$100 Other _____

How is the pledge paid? Cash or Check # _____

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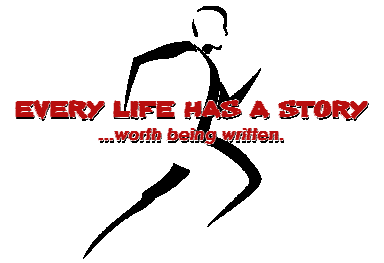
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How is the pledge paid? Cash or Check # _____

*****For Organization Purposes Only*****

of pages for this participant: _____

Total # of sponsors: _____ Total \$ collected: _____ Counted by: _____



Participant Name: _____

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