PLEDGE FORM

CRISIS PREGNANCY CLINIC OF SOUTHERN CALIFORNIA

Once completed, please mail to: Avenues Pregnancy Clinic 1911 W. Glenoaks Blvd. Suite A Glendale, CA 91201.

You may also drop it off at the same location the day of the event from 9 a.m. until 1 p.m. Submit donations/pledges by August 12, 2021. Please do not mail cash. Thank you.

VISIT GOWALKFORLIFE.ORG FOR A LIST OF PRIZES YOU CAN WIN!

Join us SATURDAY, AUGUST 7, 2021 at 10 a.m. PST Virtual Live Event at Facebook.com/CPCSCal, avenuespc.org/events or YouTube.com/user/cpcscal

"Have I not commanded you? Be strong and courageous. Do not be afraid; do not be discouraged, for the LORD your God will be with you wherever you go." Joshua 1:9

Please Print

Walker's Name _____ (FIRST) _____ (LAST)

Address _____

City _____ ST ___ Zip _____

Phone _____

Email _____

Church Name _____

Team Name/Captain _____

I am a(n) ☐ Individual ☐ Walker ☐ Team Captain ☐ Team Member

Gender ☐ M ☐ F

Age group ☐ Child (0-12) ☐ Teen (13-19) ☐ Adult (20+)

Birth Month_____Day_____

I would like my shirt ☐ Mailed ☐ I will pick up

☐ Adult Small ☐ Adult M ☐ Adult L ☐ Adult XL ☐ Adult 2XL

☐ Youth S ☐ Youth M

I would like my Prize ☐ Emailed/Mailed (to the address/email on the form) or ☐ I will pick up

Walkers: If collecting money from your sponsors, please hand in their donations - **DO NOT** write a total personal check for your sponsors.

NAME	ADDRESS	CHURCH	PHONE	$50	$25	OTHER	BILL ME	CASH	CHECK	ONLINE
Your Personal Pledge Here						$100				

To participate in the Virtual Walk for Life, you must sign the following release:
In consideration of the acceptance of this entry, I waive all claims for myself and my heirs against Avenues Pregnancy Clinic for any injury or illness which may result directly or indirectly from my participation. I further state that I am in the proper physical condition to participate in this event. In addition, I give Avenues Pregnancy Clinic permission to use photographs of me taken at the Virtual Walk for Life and associated events in future event promotion.

_____

Signature (Parent or Guardian must sign for persons under 18 years of age.) **Date**

WALKERS: Please add your gift and pledge totals from the above sponsors before mailing or dropping off.

BILL ME	+ CASH COLLECTED	+ CHECKS COLLECTED	+ ONLINE	TOTAL
$	$	$	$	$