



## OFFLINE DONATION FORM

This printable form is available for supporters who would like to donate to a participant offline via check or money order. If you are an organization interested in sponsoring a Walk location, please contact the Walk Coordinator for a sponsor form.

My contribution is crediting \_\_\_\_\_  
Participant's First & Last Name or Team Name

In the \_\_\_\_\_ Walk.  
Walk Location (CITY/STATE) Donation Amount

\$ \_\_\_\_\_

Donor Name (First & Last) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_

**Make checks payable to Apraxia Kids  
(Please do not staple or tape checks to this form)**

**Thank you for your contribution!**  
**Mail this form and your check/money order (do not send cash) to:**

**Apraxia Kids  
P.O. Box 899  
Wexford, PA 15090**