

6th Annual Bixler Lake “Walk for Life” Donation Sheet

Name of Participant(s): _____

Phone Contact: _____

Address: _____

Email: _____

Are you with a church or organization? _____

To allow Life and Family Services to use your information for newsletters and statistics,
please sign here: _____

Check box if you are interested in receiving pro-life information via email

I recognize that all donations collected will be directly donated to the **Right to Life of Northeast Indiana, a pro-life organization dedicated to protecting the rights of unborn children.*

Name

Donation Amount

Total Donations Collected:	\$

Please turn in this donation form along with cash or check donations (**checks payable to Right to Life of Northeast Indiana**) to either the Life and Family Services office or at the Registration Table the day of the walk, Saturday May 14th at 10:00 am. **For questions, contact Debbie Derby at dderby@lfsfamilies.org or call 260.347.5720.**