

Sponsor pledge form

WALK YEAR _____

My Goal Is

Lifeguard:
\$100 or more

Lifesaver:
\$250 or more

Walker's Name _____

Address _____ Phone _____

City _____ State _____ Zip _____

Email _____

Church _____

I am walking in honor memory of _____

Please clearly print **all information** and indicate the **total pledge desired**.

Be sure to check box if pledge is prepaid or paid online.

Prepay with cash or check, or pay online at textlife.org. All gifts are tax-deductible.

My Personal Gift:

PLEASE PRINT

Address _____ Apt. # _____

City _____ State _____ Zip _____

\$10 \$25 \$50 \$100 Other \$ _____ Prepaid Paid Online

First _____ Last _____

Address _____ Apt. # _____

City _____ State _____ Zip _____

\$10 \$25 \$50 \$100 Other \$ _____ Prepaid Paid Online

First _____ Last _____

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Mail to: **Texans for Life** | P.O. Box 171443 | Arlington, Texas 76003

TOTAL: \$ _____