

3RD ANNUAL RUN FOR YOUR RIGHTS!

5K Run/Walk at Lake Padden is Saturday, August 29!



Walker's Name: _____	Team Name (if applies): _____
Address: _____	City/State/Zip: _____
Phone: _____	Email: _____

Checks can be made payable to NARAL Pro-Choice Washington.
Record credit card information only if paying with credit card. Thank you!

Sponsor's Name	Address	Phone/email	\$ Pledged
1.			
Credit Card #		Exp. Date	Visa ____ MC ____
2.			
Credit Card #		Exp. Date	Visa ____ MC ____
3.			
Credit Card #		Exp. Date	Visa ____ MC ____
4.			
Credit Card #		Exp. Date	Visa ____ MC ____
5.			
Credit Card #		Exp. Date	Visa ____ MC ____
6.			
Credit Card #		Exp. Date	Visa ____ MC ____
7.			
Credit Card #		Exp. Date	Visa ____ MC ____
8.			
Credit Card #		Exp. Date	Visa ____ MC ____
9.			
Credit Card #		Exp. Date	Visa ____ MC ____
TOTAL RAISED:		\$	



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