

P.L.C.T.A. Walk and 5k Run for Autism Awareness

Individual Sponsor Form

Saturday April 26, 2014

Please fill out all information
Print clearly

Participants Name _____ Phone _____
Address _____

Run Walk

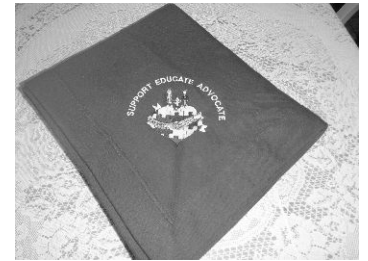
Raise amount for any category and receive the item shown next to the amount.
All items must be picked up at P.L.C.T.A. headquarters.

Name	Check	Cash	Amount

\$50 Unisex Watch



\$100 Blanket



\$150 Choice of Sweatshirt



Style zipper _____
hoodie _____

Color grey _____
black _____

Please indicate size _____
S, M, L, XL

Total