

Participant Information:

Spotlight on Lyme - 5K Run/Walk May 23, 2010

Sponsor Pledge Form

Name: Address: Phone (Home):		E-Mail:				
		City:	State:		Zip:	
		(Work or cell):				
Sponsor's Name	Address	City, State, Zip	Phone	Pledge	Ttl. Due	Amt. Pd.
			TOTAL			

Sponsors should make checks payable to the Lyme Disease Association, P.O. Box 29, Little Silver, NJ 07739

All pledge money must be turned in on the day of the event!

You may be able to double or even triple your pledge dollars! Many corporations have matching fund policies for employees' contributions to charities. Check with your company for details.

For more information contact us at SpotlightOnLyme@gmail.com.

Lyme Disease Association, Inc., (non paid) volunteer solicitation – CHARITABLE SOLICITATION AND THE PERCENTAGE OF CONTRIBUTIONS RECEIVED BY THE CHARITY DURING THE LAST REPORTING PERIOD THAT WERE DEDICATED TO THE CHARITABLE PURPOSE MAY BE OBTAINED FROM THE ATTORNEY GENERAL OF THE STATE OF NEW JERSEY BY CALLING 973-504-6215 AND IS AVAILABLE ON THE INTERNET AT http://www.state.ni.us/lps/ca/charfrm.htm. REGISTRATION WITH THE ATTORNEY GENERAL DOES NOT IMPLY ENDORSEMENT.