



"Hike the Hill"

DONATION FORM

HIKE THE HILL

Saturday, October 6th, 2018

Individual Name: _____

Telephone: _____

Address: _____

Email: _____

City / State: _____ Zip: _____

Team Name / Captain: _____

Name	Address	Phone	Email	Donation Amount	Cash	Check	CC

Hike with Hope!

- Please photocopy this form if you need extras.
- Make checks payable to: **AIDS Food Store Long Beach.**
- Receipts will be issued for all donations. Please include your address.
- **Donations can be made online at www.aidsfoodstore.org or turned in on day of event.**

Subtotal (this page only)	\$
TOTAL DONATIONS (All Pages)	\$

We appreciate your support of "Hike the Hill". The information you provide will be used to provide tax receipts and updates on the event.