

Donation Form

Yes! I want to sponsor		
Participant Nama		
Participant Name		
Donor Information		
First Name Middle Init	tial	Last Name
Mailing Address		Apt. / Suite Number
City	State / Province	Zip / Postal Code Country
Payment Information		
Check Money Order		\$
Places make checks and manay orders navable to Ch	arity Troke Inc	Amount Donated
Please make checks and money orders payable to Charity Treks, Inc. Please note that the income tax receipt will be issued to the name and address indicated on the top of the check / money order, unless instructed otherwise.		
Credit card donations are accepted online via Active. Please visit our website at www.charitytreks.org and click on the Donate button for further instructions.		
100 % of donations received by Charity Treks, Inc. are given to the beneficiaries. Charity Treks, Inc. takes no monies for		
expenses and does not charge a fee to the beneficiari donations from corporations and individuals, as well a		nt. Ride expenses are supported by in-kind
For more information, visit our website at www.charit	ytreks.org and look under I	About / Beneficiaries.
Signature		Date

Mail your donation and this form to the address on the right. Charity Treks, Inc. will send this money to the beneficiaries after adding your generous donation to the participant's total. Charity Treks, Inc.
P.O. Box 321
Charlottesville, VA 22902

