



Arthritis Foundation

Team Name _____

Team Captain _____

Phone # _____

Email _____

Use this form to keep track of all your team member's donations. Enter donation amounts and information below. Turn in completed form with all team donations at event registration or at your local Arthritis Foundation office.

Team Member Name	Online \$	Offline \$	Total \$ Raised	Pending \$
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
13				
14				
15				
TOTAL WALKER MONEY RAISED			\$	

Other team money (fundraising from additional team activities like raffles, promotions, etc., not included above)

_____ + \$ _____
 _____ + \$ _____
 _____ + \$ _____

TOTAL = walker money + other team money = \$ _____