

Support me as I participate in the 2009 Jingle Bell Run/Walk - Milwaukee, WI

Participant's Name: _____

Team Name: _____

Yes! I will make a contribution to help Arthritis Foundation, Wisconsin Chapter.

\$250 Winter Wonderland (\$250+) Please accept my gift of \$250

\$100 Snowman (\$100+) Please accept my gift of \$100

\$50 Snowball (\$50+) Please accept my gift of \$50

\$25 Snowflake (\$25+) Please accept my gift of \$25

Other (minimum \$10 Flurry) (\$10+) Enter the amount here: \$_____.

Please Make Your Checks Payable to Arthritis Foundation, Wisconsin Chapter

Name _____

Address _____

City _____ State/Province _____

Zip/Postal Code _____

Donor Phone _____

Email _____

Thank You So Much For Your Contribution!

Mail this form and your check to:

Arthritis Foundation, Wisconsin Chapter

Attn: Gena Fischer
1650 S 108th St
West Allis, WI 53214
414.321.3933
gfischer@arthritis.org

Additional Information

Thank you for your support of the Arthritis Foundation. Your donation makes it possible for the Arthritis Foundation to continue serving people with arthritis and related diseases, their families, and the health care professionals who help them. Your generous support also provides funds for critical arthritis research, local community programs, essential health education, and government advocacy initiatives. Please make your check payable to the Arthritis Foundation. Thank you!