



## **OFFLINE DONATION FORM**

*This printable form is available for supporters who would like to donate to a participant offline via check or money order. If you are an organization interested in sponsoring a Walk location, please contact the Walk Coordinator for a sponsor form.*

My contribution is crediting \_\_\_\_\_  
*Participant's First & Last Name or Team Name*

In the \_\_\_\_\_ Walk.  
*Walk Location (CITY/STATE)*

Donation Amount \$ \_\_\_\_\_

**Make checks payable to Apraxia Kids.**  
***(Please do not staple or tape checks to this form)***

Donor Name (First & Last) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Phone \_\_\_\_\_

**Thank you for your contribution!**

**Mail this form and your check (please do not send cash) to:**

**Apraxia Kids  
1501 Reedsdale Street, Suite 202  
Pittsburgh, PA 15233**