hope

MEDICAL CLINIC

PREGNANCY DIAGNOSIS AND SUPPORT

Walk For Hope 2023 Sponsor Contact List

Participant's Name _____ Email _____

Pledge the total amount you are willing to donate for this event. This amount is determined by you, the sponsor, it is not based on the distance or time of the person you are sponsoring. Your generous support is what keeps Hope alive. Thank you.

Sponsor's Name	Phone #	Email	Pledge $	Text	Email	Call