



# PLEASE SUPPORT

**by donating to our Catholic Schools Walk!**

**Name:** \_\_\_\_\_

**Organization (If Applicable):** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State & Zip:** \_\_\_\_\_

**Best Phone Number:** \_\_\_\_\_

**Best Email:** \_\_\_\_\_

## PAYMENT OPTIONS

Online	<a href="http://www.catholicschoolswalk.org">www.catholicschoolswalk.org</a> Click on _____ page and proceed to make your payment online.		
Check	<a href="#">Make payable to</a> _____		
Credit Card	# _____	Expiration: _____/_____	Code: _____
	Signature: _____		

**Please return forms by**