The CAP Walk

THERAPY DESIGNS (A Community Partner)

April 8, 2006

The Forum
3900 W. Manchester Blvd.
Inglewood, CA 90305
8:00 AM-3:00 PM

Pledge Form

Walker's Name _____ Phone ( ) _____ Team Name _____

Address _____ City, State _____ Zip Codes _____

My Fundraising Goal: $ _____

Please have sponsor's **PRE-PAY WITH CHECKS** payable to: Child Abuse Prevention Walk. Contributions are tax deductible

Sponsor' Name	Area Code	Telephone Number	Amount Pledged	Matching Gift	Total Pledge	Amount Collected Pre-Walk

Please mail completed pledge forms to:

The Cap Walk
P.O. Box 91890
Los Angeles, CA. 90009
Ph. (323) 750-0629
Fax: (323) 750-0549

Please total all pledges below

Amount Pledges	Matching Gifts	Total Pledges	Amount Collected Pre-Walk

The CAP Walk registration fee is $25.00 per person.