

# When You Support AIDS WALK Kansas City,

you're helping fight the spread of HIV and AIDS in the KC metro area by supporting organizations that help people fight this disease.

In addition, your donations provide funding to other organizations as grants used to educate against the spread of HIV/AIDS. Some of these grants have gone to The Guadalupe Center, Coterie Theater's Dramatic Health Education Project, Calvary Community Outreach Network, reStart, Inc., Sheffield Place, KC Passages Youth Center, and Crittenton Children's Center.

## READY?

It's easy...and free! Register online as an individual or as part of a team at [www.aidswalkkansascity.org](http://www.aidswalkkansascity.org)

## SET?

Collect money & pledges from friends, family and co-workers in these two easy ways: **ONLINE** - Create your free, personal fundraising page at [www.aidswalkkansascity.org](http://www.aidswalkkansascity.org). Then, send emails to everyone you know asking them to visit your webpage and make a donation...or

**OFFLINE**- Use this pledge form to track and collect cash, credit cards or checks made payable to **AIDS Walk Kansas City**.

Bring (or mail) your donations and pledge form to the AIDS WALK Registration Tent on event day May 6, 2023.

Mail your donations & pledge form to the AIDS Walk at PO Box 32192, Kansas City, MO 64171.

## WALK!

at Theis Park on Saturday, May 6, 2023

Registration: 8:00 am; Walk Ceremonies: 9:00 am; then join the WALK at 10:00 am!

**MORE at AIDSWalkKC.org Download Center!**

- Facebook Fundraising Logos
- Team Forms & Receipts
- Posters & Logos
- Fundraising Ideas & More

# AIDS WALK KANSAS CITY PLEDGE FORM

Please make checks payable to AIDS WALK KANSAS CITY. Donations may also be made by credit card by visiting [www.AIDSWalkKC.org](http://www.AIDSWalkKC.org)  
All donations are tax deductible. Please print.

## MY TEAM NAME

DONOR NAME	PHONE #	BILLING ZIP	CARD #	CCV/ECCID	EXPIRES	AMOUNT	CIRCLE ONE VISA DISCOVER M-CARD AMEX
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PRINTED SIGNATURE \_\_\_\_\_ PARTICIPANT SIGNATURE \_\_\_\_\_

IF UNDER 18, PARENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

WAIVER: In consideration of your acceptance of this form, I hereby for myself, my administrators, my heirs and assigns, waive and release any and all rights and claims for damages I have against the organizers of this Walk, their associates and representatives. I also agree to obey all traffic laws, exercise all safety precautions, avoid littering and respect the property of others. If participant is under the age of 18, parent or guardian must sign waiver.