# Miles for Megan 5K and Family Fun Walk

## Sponsor Sheet

Make additional copies as needed. (Please make all checks payable to: **The Miracle for Megan Foundation**)

| Sponsor Name | Address, City, State, Zip | Phone, Email | Sponsor Pledge Amount | Received | Matching Employer Gift (must have proper forms) | Received | Total Amount Pledged |
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| | | SUBTOTALS | $ | | $ | | $ |

GRAND TOTAL: $

**Name** (please print): _____ **Phone**: _____

Mail pledge sheets and donations to: The Miracle for Megan Foundation, 8732 Cimarron Circle, Baltimore, MD 21234