



## Participant Registration/Donation Form

**Event Site:** Alachua County

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

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

**Total Cash/Checks Turned in TODAY \$** \_\_\_\_\_

**Total Credit Card Donation Made TODAY \$** \_\_\_\_\_

**Registered Online? Yes No**

**Please provide your contact information below:**

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

**City:** \_\_\_\_\_ **State** \_\_\_\_\_ **ZIP Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

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

***PRIVACY NOTICE:** All personal information provided above will be used by March of Dimes as outlined in its Privacy Policy (available at <https://www.marchofdimes.org/policy.aspx>).*

***DONATIONS:** As a policy matter, March of Dimes prefers to receive unrestricted donations. This enables March of Dimes to direct funds to areas of greatest need and mission impact. March of Dimes will however honor your written request to restrict your personal donation. Walkers cannot legally restrict donations on behalf of their sponsors without the sponsors' written permission.*

**Please send completed form, along with donations via United States Postal Service to:**

March of Dimes  
P.O. Box 3153  
Harlan, IA 51593-0344