Please note that YOU DO NOT NEED TO WALK ON THE DAY OF THE EVENT to participate with us. You can get sponsors and walk or run wherever you are!



Scan the QR code to register online:





Martial Cottle Park or Choose Your Location | Check-In at 8:30 AM | Walk or Run at 9:00 AM



The Walk for Life is a family friendly community awareness fundraising event for the entire family! All proceeds go towards providing life-affirming services to women, men, students, and families through our medical clinics and outreach programs in the Bay **Area.** We encourage you to form church, family, community, or corporate teams. Come celebrate the gift of life!

SERVICES INCLUDE:

- Pregnancy Testing
- Pregnancy Options Consultations
- Patient Advocacy
- Ultrasound Imaging
- Prenatal Care
- Material Support

- Abortion Pill Reversal Treatment
- STD Testing & Treatment
- Well Woman Care
- Reproductive Loss Healing
- Education for Students & Parents

- College Campus Outreach

Fundraise Online!

- 1. Go online to www.friendsofrealoptions.net.
- 2. Click the **Register Here** link and follow the prompts.
- **3.** Create your own fundraising page using email and your social network – ask everyone you know to sponsor you online!

Raise \$200 and receive a 2024 Walk For Life T-shirt *While supplies last.





Register at www.FriendsofRealOptions.net Register Online. Form a Team. Get Sponsors.

Event Date: Saturday, March 2, 2024 | My Personal Goal: \$ THIS PLEDGE FORM BELONGS TO: EACH FUNDRAISER MUST HAVE THEIR OWN PLEDGE FORM AND/OR ONLINE FUNDRAISING PAGE. PLEASE WRITE PARTICIPANT'S NAME ABOVE

STRFFT ADDRFSS

MOBILE NUMBER

FMAII

I AM A(N):	🗆 ADU	JLT (50+)	🗆 ADULT (35-4	.9)
PARTICIPAT	ING IN:	□ WALK	🗆 5K RUN*	*A mini
I AM PARTIO	CIPATING	G AS A(N):	🗆 INDIVIDUAL	

TEAM NAME (A TEAM CONSISTS OF 3 OR MORE FUNDRAISERS.)

Martial Cottle Park or Choose Your Location Check-In at 8:30 AM | Walk or Run at 9:00 AM

CITY

STATE

ZIP CODE

CHURCH/ORGANIZATION

ADULT (18-34)

🗆 YOUTH (13-17)

CHILD (0-12)

imum of \$50 sponsorship is required

TEAM CAPTAIN

TEAM MEMBER

TFAM CAPTAIN NAME

WAIVER: I HEREBY WAIVE ALL CLAIMS AGAINST REALOPTIONS, ITS SPONSORS, OR ANY PERSONNEL FOR ANY INJURY I MIGHT SUFFER AT THIS EVENT.

PLEASE PRINT CLEARLY

Full Name						
Address						
City		Sta	te		Zi	р
Email						
Cell				🗆 Ca	sh	🗆 Check
My Contribution (circle one):	\$25	\$50	\$75	\$100	\$_	
Enclose cash and checks when turning	g in pledg	ge form(s	s).			Bill Me (minimum \$25)

Full Name						
Address						
City		Sta	te		Zi	р
Email						
Cell				□ Ca:	sh	🗆 Check
My Contribution (circle one):	\$25	\$50	\$ 75	\$100	\$_	
Enclose cash and checks when turning						Bill Me (minimum \$25)

Full Name						
Address						
City		Sta	te		Zi	р
Email						
Cell				🗆 Cas	sh	🗆 Check
My Contribution (circle one):	\$25	\$50	\$75	\$100	\$_	
Enclose cash and checks when turning	in pledg	ge form(:	s).			Bill Me (minimum \$25)

Full Name						
Address						
City		Sta	te		Zi	р
Email						
Cell				🗆 Cas	sh	🗆 Check
My Contribution (circle one):	\$25	\$50	\$75	\$100	\$_	
Enclose cash and checks when turning	g in pledg	ge form(s).			Bill Me (minimum \$25)

Full Name						
Address						
City		Sta	te		Zi	р
Email						
Cell				🗆 Ca	sh	🗆 Check
My Contribution (circle one):	\$25	\$50	\$75	\$100	\$_	
Enclose cash and checks when turning	; in pledş	ge form(s	s).			Bill Me (minimum \$25)

Full Name						
Address						
City		Sta	te		Zij	p
Email						
Cell				🗆 Cas	sh	🗆 Check
My Contribution (circle one):	\$25	\$50	\$75	\$100	\$_	
Enclose cash and checks when turning	in pledg	ge form(s).			Bill Me (minimum \$25)

Full Name						
Address						
City		Sta	te		Zi	р
Email						
Cell				🗆 Ca	sh	🗆 Check
My Contribution (circle one):	\$25	\$50	\$75	\$100	\$_	
Enclose cash and checks when turning	in pledg	ge form(:	s).			Bill Me (minimum \$25)

Full Name						
Address						
City		Sta	te		Zi	p
Email						
Cell				🗆 Cas	sh	🗆 Check
My Contribution (circle one):	\$25	\$50	\$75	\$100	\$_	
Enclose cash and checks when turning	in pledg	ge form(:	s).			Bill Me (minimum \$25)

REMEMBER TO SPONSOR YOURSELF!

"BILL ME" MINIMUM \$25

Full Name			Full Name		
Address			Address		
City S	State	Zip	City	State	Zip
Email			Email		
Cell	Cas	sh 🛛 Check	Cell		🗆 Cash 🛛 Check
My Contribution (circle one): \$25 \$5	50 \$75 \$100		My Contribution (circle one): \$25	\$50 \$75	
Enclose cash and checks when turning in pledge for	rm(s).	Bill Me (minimum \$25)	Enclose cash and checks when turning in pledg	e form(s).	(minimum \$25)
Full Name			Full Name		
Address			Address		
<u>City</u> S	State	Zip	City	State	Zip
Email			Email		
Cell	Cas	sh 🛛 Check	Cell		🗆 Cash 🛛 Check
My Contribution (circle one): \$25 \$5	50 \$75 \$100		My Contribution (circle one): \$25	\$50 \$75	
Enclose cash and checks when turning in pledge for	rm(s).	Bill Me (minimum \$25)	Enclose cash and checks when turning in pledg	e form(s).	Bill Me (minimum \$25)
Full Name			Full Name		
Full Name Address			Full Name Address		
Address	State	Zip		State	Zip
Address	State	Zip	Address	State	Zip
Address City S		Zipsh Check	Address City	State	Zip □ Cash □ Check
Address City S Email	Cas	sh 🗆 Check	Address City Email		□ Cash □ Check \$100 \$
Address City S Email Cell	□ Cas 50 \$75 \$100	sh 🗆 Check	Address City Email Cell	\$50 \$75	□ Cash □ Check
Address City S Email Cell My Contribution (circle one): \$25 \$5	□ Cas 50 \$75 \$100	sh 🗆 Check \$ 🗆 Bill Me	Address City Email Cell My Contribution (circle one): \$25	\$50 \$75	□ Cash □ Check \$100 \$ □ Bill Me
Address City S Email Cell My Contribution (circle one): \$25 \$5	□ Cas 50 \$75 \$100	sh 🗆 Check \$ 🗆 Bill Me	Address City Email Cell My Contribution (circle one): \$25	\$50 \$75	□ Cash □ Check \$100 \$ □ Bill Me
Address City S Email Cell My Contribution (circle one): \$25 \$5 Enclose cash and checks when turning in pledge for	□ Cas 50 \$75 \$100	sh 🗆 Check \$ 🗆 Bill Me	Address City Email Cell My Contribution (circle one): \$25 Enclose cash and checks when turning in pledg	\$50 \$75	□ Cash □ Check \$100 \$ □ Bill Me
Address City S Email	□ Cas 50 \$75 \$100	sh 🗆 Check \$ 🗆 Bill Me	Address City Email Cell My Contribution (circle one): \$25 Enclose cash and checks when turning in pledg Full Name	\$50 \$75	□ Cash □ Check \$100 \$ □ Bill Me
Address City S Email	Cas 50 \$75 \$100 rm(s).	sh Check S Bill Me (minimum \$25)	Address City Email Cell My Contribution (circle one): \$25 Enclose cash and checks when turning in pledg Full Name Address	\$50 \$75 re form(s).	Cash Check S100 S Bill Me (minimum \$25)
Address City S Email S Cell S My Contribution (circle one): \$25 Enclose cash and checks when turning in pledge for Full Name Address City S	Cas 50 \$75 \$100 rm(s). State	sh Check S Bill Me (minimum \$25)	Address City Email Cell My Contribution (circle one): \$25 Enclose cash and checks when turning in pledg Full Name Address City	\$50 \$75 re form(s).	Cash Check S100 S Bill Me (minimum \$25)
Address City S Email S Cell S My Contribution (circle one): \$25 Enclose cash and checks when turning in pledge for Full Name Address City S Email	Cas 50 \$75 \$100 rm(s). State Cas	sh Check S Bill Me (minimum \$25) Zip	Address City Email Cell My Contribution (circle one): \$25 Enclose cash and checks when turning in pledg Full Name Address City Email	\$50 \$75 e form(s). State	Cash Check Control Cash Check Control Control Control Control Control

PLEASE DO NOT RECORD PLEDGES OR DONATIONS RECORDED ONLINE

YOUR GIFT WILL SAVE LIVES!

DOWNLOAD ADDITIONAL PLEDGE FORMS AT: www.FriendsofRealOptions.net "Resources" OR CALL 408-229-9836