

# Walk for Autism - April 29, 2012

## Sponsor Sheet

ALL 4 WALKS: REGISTRATION 11:00AM - 12:00PM \*WALK BEGINS AT 12:00PM\* ALL WALKS 2 MILES

UNIVERSITY OF NEW ENGLAND  
BIDDEFORD, ME

FARMINGTON FAIRGROUNDS  
FARMINGTON, ME

UNIVERSITY COLLEGE OF BANGOR  
BANGOR, ME

UNIVERSITY OF MAINE  
PRESQUE ISLE, ME

### Personal Information

To register please fill out form and print off for your records

First Name: \_\_\_\_\_ Last Name \_\_\_\_\_

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

City: \_\_\_\_\_ State: ME Zip: \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Email Address \_\_\_\_\_

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### Walker Information

I am walking: \_\_\_\_\_ as an individual/family \_\_\_\_\_ Bangor (please choose site)  
\_\_\_\_\_ as a team member \_\_\_\_\_ Biddeford  
\_\_\_\_\_ Farmington  
\_\_\_\_\_ Presque Isle

### Team Information

Team name: \_\_\_\_\_

Team Captain: \_\_\_\_\_

Contact person: \_\_\_\_\_

Contact number: \_\_\_\_\_

### Donation Information

\_\_\_\_\_ I would like to donate now using a credit card - see below

\_\_\_\_\_ I will donate at the event

### Credit Card Information

Donation Amount: \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_

Cardholder's Address: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

(visa or Mastercard only)

Expiration Date: \_\_\_\_\_

