



Donation/Pledge Form

Donations for [participant name]:_____

On Sunday October 2nd, I will be participating in the Parkinson Foundation of the National Capital Area's Walk Off Parkinson's event. I will join hundreds of people with the goal of helping improve the lives of people impacted by the Parkinson's disease. The funds collected will go to provide programs that help manage the disease as well as various education programs. **I hope you can help by making a donation**.

Please make checks payable to Parkinson Foundation of the National Capital Area or PFNCA.

Donor Name	Email Address or Phone	Donation Amount

Please return this form with your donation to the participant listed above. Checks made payable to PFNCA can also be mailed to PFNCA, 3570 Olney Laytonsville Rd #490, Olney, MD 20830. Please include the participant's name in the memo line. If you would like to make a donation by credit card, please call PFNCA at 301-844-6510. Thank you for your support!

Note to Participant: You can use this form to collect donations from a group of people at one time. For example, if you participate in a book group, you can use this form to ask for donations and keep track of them.