

# Spotlight on Lyme – 5K Run/Walk – May 22, 2011



## Sponsor Pledge Form

### Participant Information:

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_

Sponsor's Name	Address	City, State, Zip	Phone	Pledge	Total Due	Amount Paid
TOTAL						

Sponsors should make checks payable to the **Lyme Disease Association**

**All pledge money must be turned in on the day of the event!**

**You may be able to double or even triple your pledge dollars!** Many corporations have matching fund policies for employee's contributions to charities. Check with your company for details.

**For more information** contact [spotlightonlyme@gmail.com](mailto:spotlightonlyme@gmail.com).

**The mailing address is: Spotlight on Lyme, P.O. Box 29, Little Silver, NJ 07739**