



2023

# Walk For Life <sup>& SK</sup>

Abigail Pregnancy Services



Participant(s): \_\_\_\_\_

My Goal: \_\_\_\_\_

Total Pledges: \_\_\_\_\_

**Walk for LIFE! Goal:  
\$25,000**

Please turn in any money collected with completed pledge forms to the center at 3900 Laylin Road in Norwalk **OR** bring to the Walk for LIFE! on May 20th **OR** mail to P.O. Box 68, Norwalk, OH 44857 by May 31st, 2023

**PLEASE DO NOT INCLUDE PLEDGES  
OR DONATIONS RECORDED ONLINE!**

\*If writing a check, please include who you are sponsoring on the memo line

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Cash  Check Amount \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Cash  Check Amount \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Cash  Check Amount \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Cash  Check Amount \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Cash  Check Amount \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Cash  Check Amount \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Cash  Check Amount \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Cash  Check Amount \_\_\_\_\_