

2017 Walk Donation Submission Form

Use this form if you are a registered walker to send collected donations. If you are not registered, please register online at www.pkdcure.org, or include a mail-in registration form with this submission.

This person wi	Walker's Information Il receive credit for the dor uded in this envelope. Use						n for each wa	alker in your
Name:			Email:					
Address:								
City:			State: Zip:					
Name of Wall	:	Team Name (if applicable):						
Check Donations Fill out the following information for each check included in this submission. Write your name in the memo line of each check to ensure you receive credit for the donation. If the name on the check is different than the donor you wish to receive thanks, please include that information as well.								
Date Written				Donor to be Thanked/Credited If different from Name on Check)			Check Number	Amount
Cash Donations Do NOT mail cash. Please convert cash to a cashier's check or money order. Many banks will convert the free if you let them know it is a charitable event. Please fill out the following information for each cash substitutions.								
Name of Cas	Address, City, State, Zip						Amount	
Cashier's Check/Money Order Info		Type of Certified Funds:						Amount
	Make check payable to: PKD Foundation							

Please mail form PKD Foundation & donations to: Attn: Walk for PKD

1001 E. 101st Terrace, Suite 220

Kansas City, MO 64131

The PKD Foundation will send receipts/thank you notes to offline donors who donate \$50.00 or more, provided we have your donors email or mailing address. We encourage you to provide a personal thank you to all of your donors. Cash receipts can be found in the walk tool box. Visit www.walkforpkd.org