

Thanks for donating to Change Childhood Cancer at Valley Elementary!

Event ID: 1228289-CCC

Please print and fill out the form below and include it with your check or money order. We'll post your donation to the fundraising page within one week of receiving this form.

| Your Information | |
|---|---|
| First Name: | Last Name: |
| Street Address: | City: |
| State: | Postal Code: |
| Phone: | Email: |
| ☐ YES! Please email me periodic updates about ALSF! | |
| Donation Details | |
| Donation Amount: \$ | |
| Have you donated to Alex's Lemonade Stand | Foundation before? Yes / No |
| Display name for the fundraising page (such a | s The Smith Family, or Jane Smith): |
| If your donation is on behalf of a team member | er (for pages with multiple participants), list the |
| team member's name here: | (.e. pages with mattiple participants), list the |
| | |

Please mail your donation to:

Alex's Lemonade Stand Foundation 333 E. Lancaster Ave, #414 Wynnewood, PA 19096

Questions?Call us at 866-333-1213