



MY SPONSOR FORM

STEP 1. Register

Register online at www.scprc.com or by phone (814) 234-7341.
 Registration Fee: \$30 early bird (before 8/28/19) or \$35 after 8/28/19. Or, commit to raising sponsorship for your participation. Individuals and families who choose to fundraise are asked to raise a minimum \$35 per registrant.

STEP 2. Ask for Sponsors, (If Fundraising)

Ask everyone you know to sponsor you with a tax-deductible gift! Raise support online with a personal fundraising page which is provided to you upon registration, or fill out this form and bring it with you to the event.

STEP 3. Walk, Run or Ride

Gather your friends and join us on Saturday, September 14th.
 Any participant who registers before 8/28 will be guaranteed an event tee shirt. Our top runners and fundraisers will be eligible for some awesome prizes!

MY GOAL IS: \$ _____		
PARTICIPATING IN: <input type="checkbox"/> 5K RUN/WALK <input type="checkbox"/> BICYCLE	I WANT TO SPONSOR MYSELF: \$ _____	<input type="checkbox"/> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> BILL ME
PARTICIPANT NAME _____		
TEAM NAME (if applicable) _____		
ADDRESS _____		
CITY _____	STATE _____	ZIP _____
PHONE _____	EMAIL _____	
CHURCH/ORGANIZATION _____		

- Do not include donations collected through your online fundraising page on this form.
- Please print clearly and remember zip codes.
- For additional sponsor forms visit www.scprc.com or call (814) 234-7341.
- Make checks payable to Pregnancy Resource Clinic.

Pregnancy Resource Clinic exists because we believe people matter. We serve men and women in the Centre Region through pregnancy, parenting, and STD related services. By participating in You Matter 5k, you enable us to continue to offer services at no charge to our clients!

THANK YOU FOR YOUR SUPPORT!
 Pregnancy Resource Clinic is a 501(c)(3) non-profit organization. All contributions are tax-deductible.

FULL NAME _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 EMAIL _____

AMOUNT: \$100 \$50 \$30 \$20 OTHER \$ _____
 PAID: CASH CHECK BILL ME

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Total this page: \$ _____