

BRIGHTHOPE

Walking with her



WALK for LIFE

SPONSOR FORM

Walker's Name _____ Church/Group _____

Address _____ Zip _____

Phone () _____ E-mail _____

BRIGHTHOPE

PO Box 20809

Lehigh Valley, PA 18002-0809

Ways To Register

- brighthopepartners.org/walk-for-life
- email amity.bechtel@brighthopecenters.org
- call (610) 821-4000

Please print all information clearly. Make check payable to Bright Hope PSC.

PAID BILL MEO

First _____ Last _____
 Address _____
 City _____ State _____ Zip _____
 Phone () _____
 E-mail _____
 \$25 \$50 \$100 Other \$ _____
 Cash Check

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