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YFALS CORNTOSS CHALLENGE DONATION FORM

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Please direct my donation to the following Team or Participant's fundraising efforts:

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Donor Name: _____

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PAYMENT INFORMATION

Please accept my enclosed check (*checks should be made payable to ALS TDI*)

Please use the information below to bill my credit card for the amount \$_____

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Thank you for your support! Your donation is tax-deductible. You will receive a receipt from ALS TDI.
All donations to the YFALS Corntoss Challenge benefit the ALS Therapy Development Institute.

