KIDS WALK for Kids with Cancer

Walker's Name: _____

Phone Number: _____

Email: _____

Walker's Address: _____

School or group: _____

Please list below the donors of your checks and cash (not your online donations). Checks should be payable to Memorial Sloan-Kettering Cancer Center, and your name and the "Kids Walk" can be noted on the check. If you substitute your personal check in place of cash collected, please make a note to indicate this.

Donations are tax deductible to the fullest extent allowed by law. Please write legibly.

Sponsor's Name	Amount Contributed	Sponsor's Address	Note if Check or Cash and if Matching Grant

Cash $ _____ + Checks $ _____ = **TOTAL $** _____