

PLATINUM SPONSORS



GOLD SPONSORS



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Hope Choice

P.O. Box 50342 • Amarillo, TX, 79106
(806) 354-2288 • hopechoice.com



A higher standard.
A higher purpose.

HOPE + CHOICE

Pregnancy Centers and Mentoring Programs

"The land is still ours, because we have sought the Lord our God; we sought him and he has given us rest on every side. There is no one like you to help the powerless against the mighty. Help us, Lord our God, for we rely on you." 2 Chronicles 14:7 & 11

Come celebrate & walk with us – September 9, 2023!

We are excited to share that for the second year in a row, we will be hosting TWO events simultaneously on Saturday, September 9th at 9:00am! One at our Medi Park Location, 6709 Woodward and the other at our new 13|30 building on the WT Campus, 201 26th St. Bring your family and join us for free breakfast, balloons, face painting, games, and MORE!

6709 Woodward, Amarillo AND 201 26th St, Canyon
Registration starts at 8:30 a.m.
Walk Starts at 9:00 a.m.

How to Participate:

- Go paperless and fundraise online - just scan the code below!
- Fundraise by using this form and bring with you on September 9th or Mail to P.O. Box 50342, Amarillo, TX 79159
- Sponsor someone by giving online at hopechoice.com/donate/
- If you are unable to walk with us on September 9, 2023, for any reason, don't worry. You can still participate by walking with family or friends, send in your walk form or give online and we will take care of the rest! You do not have to collect money. The money will be collected by Hope Choice.

Prizes

- FREE** T-shirt with \$150 in pledges (an average of 12 sponsors)
- FREE** Sweatshirt with \$250 in pledges
- Special Gift** for the highest dollar amount



Walk Participant Information

Form ____ of ____

Name _____

Phone _____ Team/Church Group _____

Address _____

Email _____

City/State/Zip _____

Signature _____

(I release this organization from any liability for this event)

My Goal is:

- \$150
- \$250
- \$500
- \$1,000

SPONSOR INFO *Please PRINT all information and indicate the total pledge desired.*

First _____ Last _____ Address _____

City _____ State _____ Zip _____ Email _____

\$ _____ Payment Attached \$ _____ Paid Online \$ _____ To be Paid Online/Mailed to Hope Choice

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City _____ State _____ Zip _____ Email _____

\$ _____ Payment Attached \$ _____ Paid Online \$ _____ To be Paid Online/Mailed to Hope Choice

TOTAL AMOUNT RAISED ON THIS FORM \$ _____

Total amount to be paid \$ _____

TOTAL AMOUNT RAISED ON ALL MY FORMS \$ _____

Total amount raised online \$ _____

Total amount attached to this form \$ _____