



WE PROUDLY HOSTED A WELLY WALK FUNDRAISER
TO BENEFIT CHILDREN WITH CANCER

Name of participating organization: _____

Address of participating organization: _____

Date event was held: _____

Name of primary contact: _____

Phone number: _____

TOTAL AMOUNT ENCLOSED: \$ _____

IMPORTANT REMINDERS:

- Personal checks must be made out to the *Muddy Puddles Project*.
- Cash must be converted to a bank check or money order before mailing in.
- All funds collected, along with any "Welly Walk" Sponsor Forms (optional) should be mailed to the address below within 14 days of event completion.
- Email any questions to info@muddypuddlesproject.org

The Muddy Puddles Project
Welly Walk Team
1787 Route 6
Carmel, NY 10512