

24 hours of booty®

DONATION FORM

Please use this form if you prefer to mail your donation

* indicated required information

General Donor Information

* DONOR FIRST NAME:	LAST NAME:	
* STREET ADDRESS:		
* CITY:	* STATE:	* ZIP:
EMAIL:		

* CONTRIBUTION AMOUNT: \$	Make checks payable to "24 Hours of Booty."
---------------------------	---

24 Hours of Booty Participant Information

24 Hours of Booty participants earn amazing fundraising awards for their efforts.

If you would like your donation to be credited toward a particular 24 Hours of Booty participant, please indicate this below.

NAME OF 24 HOURS OF BOOTY PARTICIPANT TO BE CREDITED:	
24 HOURS OF BOOTY EVENT (choose one):	<input type="checkbox"/> Charlotte, North Carolina
	<input type="checkbox"/> Columbia, Maryland
	<input type="checkbox"/> Atlanta, Georgia

Additional Information

Stay Connected Option:

Yes, I would like to receive communications from 24 Hours of Booty.

Matching Gift: Do you intend to apply for a Matching Gift?

Yes No

If Yes, then please list Matching Gift Company:

Send Completed Donation Forms to:

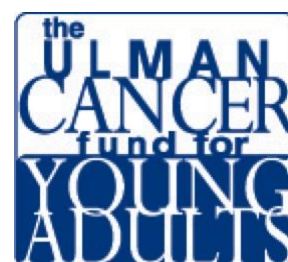
24 Hours of Booty
500 E. Morehead St.
Suite 318
Charlotte, NC 28202

About 24 Hours of Booty

The goal of 24 Hours of Booty is to provide an extraordinary event that is safe, fun, and open to all levels of cycling ability, while enhancing cancer awareness and raising funds for cancer research and programs.

24 Hours of Booty, Inc. is a registered 501(c)(3) nonprofit organization. All contributions are fully tax-deductible as provided by law. The 24 Hours of Booty's tax ID or EIN number is 20-3768277.

Financial information about this organization and a copy of its license are available from the Charitable Solicitation Licensing Section at 1-888-830-4989. The license is not an endorsement by the state.



For more information, or to make a credit card donation, please visit
www.24hoursofbooty.org