



PARTICIPANT DONATION COLLECTION FORM

Ask your friends and family to support your efforts and help raise funds for hunger relief, early childhood education, refugee resettlement and other collaborative efforts of the faith community. Every dollar helps and will be matched by the God's Grace Fund!

Your name _____ Total donations _____

Name _____	Address _____
City _____ State _____ Zip _____	☐ Check ☐ Cash Amount \$ _____

Name _____	Address _____
City _____ State _____ Zip _____	☐ Check ☐ Cash Amount \$ _____

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City _____ State _____ Zip _____	☐ Check ☐ Cash Amount \$ _____

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Make checks payable to HARC and mail to: HARC, P.O. Box 1158, Hagerstown, MD 21741 (Please do not mail cash), **drop off at the HARC office**, 130 W. Franklin St., or **bring your donations** to the Check-in Station, along with this form, on the day of the event. All donors with address listed will receive a Thank You letter for tax purposes. **Our online fundraising option** is also easy to use and is automatically set up with your registration. **Questions?** Contact Kathy Powderly at director@harccoalition.org or 301-842-4272.

THANK YOU FOR YOR SUPPORT!