



MOVING DAY @ HOME

Moving Day Event Name

Participant First & Last Name

Team Name

## Donation Collection Form

Donor Name	Donor Address	Donor Email	Check # or Cash	Amount
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$

Make checks payable to: Parkinson's Foundation

**TOTAL CASH & CHECKS**

\$

**Turn in this form with your donations the day of the walk or mail them to:**

Parkinson's Foundation  
 Attn: Donor Services – Moving Day @ Home  
 5757 Waterford District Drive, Suite 310  
 Miami, FL 33126

Need information? Call 1-800-4PD-INFO (473-4636) or visit [MovingDayWalk.org](http://MovingDayWalk.org).