



Healthy For Good
Heart Walk

Support me as I participate in the 2017 Coastal Bend Heart Walk

Yes! I will contribute to help the American Heart Association.

- ☐ Teach more than 2,500 children how to avoid obesity and live longer. (\$500+)
- ☐ Save lives by helping to distribute 15 innovative CPR Anytime kits to the community. (\$200+)
- ☐ Empower 1,000 people to improve their heart health by taking the My Life Check. (\$100+)
- ☐ Helps provide 10 comprehensive hospital discharge toolkits to stroke survivors and their families. (\$50+)
- ☐ Plant the seeds for research funding and the next medical breakthrough. (\$25+)
- ☐ Other \$_____ (Enter your own lifesaving amount here)

Please credit my donation to _____

(Enter Company team name or Individual Walker)

Name _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____

Donor Phone _____ Email _____

Thank You So Much For Your Contribution!

Mail this form and your check (payable to the American Heart Association) to:

American Heart Association
Attn: Heart Walk Customer Care Team
10900-B Stonelake, Suite 320
Austin, TX 78759

Additional Information

Donor: To ensure proper credit and acknowledgement of your donation, please fill out the form completely. Funds submitted via mail will be entered onto the participant's fundraising page by local event staff.

INTERNAL USE ONLY

AMOUNT: \$ _____ CHECK #: _____ ENTERED BY: _____