2011 CAPITAL REGION AIDSWalk

Presented by CARES, Inc.

Saturday, September 24, 2011

11AM REGISTRATION 12PM WALK BEGINS

Supporting the NAMES Project

NY Capital Region Chapter
(Keepers of the AIDS Quilt)

Sponsor Form

Walker's Name _____

Home Address _____

City _____ State _____ Zip _____ Phone _____

Email _____

Team Name _____ Team Leader _____

Please help us reach our goal of $100 per walker ***For Questions : Send an E-mail to: AIDSQuiltNY@aol.com***

Sponsor Name	Address, City, State, & Zip	Phone	Amount

Please have sponsors pre-pay with checks written to:
Community AIDS Partnership/CARES, Inc. Contributions are 100% tax deductible.
Please bring sponsor form and money to the walk or mail to:
CARES, Inc. 85 Watervliet Avenue, Albany, New York 12206 | Phone: (518) 448-WALK

Total