

MOVEATHON 2019

THURSDAY, OCTOBER 10

DONATION INFORMATION

Donor Name: _____

Student Family Name to Credit: _____

Contact Phone: _____ Contact Email: _____

Address: _____

City, State, Zip: _____

Donation Amount: _____

Payment Information:

_____ Check

(Payable to St. Madeleine Sophie School and return to: 4400 –130th PL SE, Bellevue, WA 98006)

_____ Credit Card

(Payment by credit card go to www.smsbellevue.org and click on quick link for **Moveathon 2019**)

FOR SPONSORSHIP INFORMATION, PLEASE GO TO OUR WEBSITE.

Thank you for supporting St. Madeleine Sophie School!

St. Madeleine Sophie Parish School tax ID# 91-0839141

