



PNC Field – June 6, 2020

**Walker Fund-Raising Form (Please print)**

Full Name of Walker: \_\_\_\_\_

Name of organization I am supporting: **Northeast & Eastcentral PA Area Health Education Center**

My fund-raising goal is \$ \_\_\_\_\_

**\*Walker receives 1 Raffle Ticket for every \$50 raised**

Name and Email Address	Donation Amt.
1.	\$
2.	\$
3.	\$
4.	\$
5.	\$
6.	\$
7.	\$
8.	\$
9.	\$
10.	\$
11.	\$
12.	\$
	\$

My own donation: \_\_\_\_\_

TOTAL: \_\_\_\_\_

**Note: All funds raised should be sent to Northeast AHEC by June 1, 2020 along with form.**

**Please send checks only payable to NEPA AHEC**

*(Memo: Highmark Walk 2020)*

**Northeast PA Area Health Education Center**

Attn: Highmark Walk 2020

5662 Interchange Road

Lehighton, PA 18235

For more information please contact Valerie Williams at 610-379-2001 or [vwilliams@ecneahec.org](mailto:vwilliams@ecneahec.org)