

Participant Information

NAME		
ADDRESS		
CITY	STATE	ZIP CODE
EMAIL	PHONE	

OTTAWA COUNTY'S

15th ANNUAL

CARI MCGRATH

Red Dress

RUN



Participants are encouraged to raise money for the American Heart Association, but it is not a requirement to take part in the Red Dress Run. Please use the below form to collect donations. Donations can be made in honor or memory of someone with heart disease.

ADDITIONAL DONATION SPACE ON BACK OF THIS FORM

DONATIONS*

*Cash or Checks only. Please make checks payable to American Heart Association

NAME	ADDRESS	CITY	STATE	ZIP CODE	AMOUNT	DONATION IS IN MEMORY/HONOR OF:
						NAME _____ Please Check: _____ IN HONOR _____ IN MEMORY
						NAME _____ Please Check: _____ IN HONOR _____ IN MEMORY
						NAME _____ Please Check: _____ IN HONOR _____ IN MEMORY
						NAME _____ Please Check: _____ IN HONOR _____ IN MEMORY
						NAME _____ Please Check: _____ IN HONOR _____ IN MEMORY

Please collect all donations and return this form by **Feb. 17th** to Ottawa County Health Planning Commission
 PO Box 33
 Winneapolls, KS 67467

TOTAL AMOUNT \$ _____

DONATIONS*

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		Please Check: _____ IN HONOR	_____ IN MEMORY

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Please combine totals from this side to the total amount box on the front of this form.