



END AIDS. LIVE LIFE.

Name _____ Team Name _____ Team Number _____
 Address _____ Phone (_____) _____
 Email _____

Please use this form to list all your sponsors who donate via check, money order, cash, or matching gifts. Do not list sponsors who donate online.

My Fundraising Goal is: \$

Walkers who set a goal of \$1,000 or more are part of the exclusive Star Walkers Club™. For more information, see reverse.

Please ask everyone who sponsors you with a check, money order, or cash to pay at the time of their pledge. Checks and money orders should be made payable to: "AIDS Walk New York" or "AWNY." Please print legibly and have your sponsors write your name in the memo portion of the check. Contributions are tax deductible. Thank you.

SPONSOR'S NAME	AREA CODE	TELEPHONE NUMBER	AMOUNT PLEDGED \oplus	MATCHING GIFT \$ (IF ANY) \ominus	TOTAL PLEDGE	AMOUNT COLLECTED
(Example) <i>Sally Sample</i>	(718)	555-1430	\$100	None	\$100	\$100
(Example) <i>Salvador Sample</i>	(212)	555-1671	\$50	\$50	\$100	\$100
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BRING THIS FORM TO AIDS WALK NEW YORK RAIN OR SHINE

FOR CREDIT CARD DONATIONS, USE THE SPACES BELOW.

18. NAME *		AREA CODE *	PHONE NUMBER *			
CREDIT CARD <input type="checkbox"/> VISA <input type="checkbox"/> M/C <input type="checkbox"/> AMEX <input type="checkbox"/> DISCOVER	EXP. DATE *	CHOOSE ONE * <input type="checkbox"/> \$100 <input type="checkbox"/> \$250 <input type="checkbox"/> \$500 <input type="checkbox"/> OTHER \$ _____				
CARD NUMBER *			BILLING ZIP CODE *	SEC. CODE *		
SIGNATURE *		EMAIL ADDRESS *				
19. NAME *		AREA CODE *	PHONE NUMBER *			
CREDIT CARD <input type="checkbox"/> VISA <input type="checkbox"/> M/C <input type="checkbox"/> AMEX <input type="checkbox"/> DISCOVER	EXP. DATE *	CHOOSE ONE * <input type="checkbox"/> \$100 <input type="checkbox"/> \$250 <input type="checkbox"/> \$500 <input type="checkbox"/> OTHER \$ _____				
CARD NUMBER *			BILLING ZIP CODE *	SEC. CODE *		
SIGNATURE *		EMAIL ADDRESS *				

*Required information.

If you complete this Sponsor Form, contact us for more, or visit aidswalk.net to download additional forms.

Last year, walkers raised an average of \$342 each. Any amount you raise is greatly appreciated.

Please do not solicit contributions on the street or on public transportation. A copy of GMHC's latest financial report is available at www.gmhc.org.



AMOUNT PLEDGED \oplus	MATCHING GIFT \$ (IF ANY) \ominus	TOTAL PLEDGE \ominus	TOTAL TURNED IN AT EVENT \ominus

Please attach each Matching Gift Form to the corresponding donation when you submit your funds. For more information on how to double your donation with a matching gift, please see the reverse.



AIDS WALK NEW YORK



EVERYTHING YOU NEED TO KNOW ABOUT AIDS WALK NEW YORK!

YOUR NEXT STEP? FUNDRAISING!

- 1 AIM HIGH!**
Please set your goal high. Thousands of people living with HIV/AIDS depend on the money raised at AIDS Walk New York. With the uncertain future of federal healthcare and other services for people in need, your continued support is critically important this year.
- 2 MAKE IT PERSONAL.**
You have your own fundraising web page where donors can securely sponsor you online with a credit card or PayPal. Now it's time to jazz it up with photos, videos, and a personal note about why you walk! Get started at aidswalk.net: Enter your username and password next to "SIGN IN" at the top of the page. Don't know your login info? Contact us at awnyinfo@aidswalk.net!
- 3 ASK AWAY!**
Ask everyone – your family, friends, neighbors, and co-workers – to sponsor you. If you make it a priority to ask, they'll make it a priority to give. Use the templates in our Email Center to let everyone know about your fundraising efforts. Please consider sponsoring yourself to get a head start on reaching your goal!
- 4 GET SOCIAL!**
You can post to your Facebook, Twitter, or Instagram account right from your Fundraising HQ! Log in and click on "Promote via Social Media". You can use the pre-written templates or add your own personal message. We recommend that you download the free AIDS Walk fundraising app to easily request donations and thank donors via Twitter, email, and more!
- 5 COLLECT YOUR PLEDGES.**
Encourage everyone to PAY WHEN THEY PLEDGE. Checks can be made out to "AIDS Walk New York" or "AWNY." Sponsors who donate online via credit card or PayPal will receive an email confirmation as a receipt. Sponsors who donate cash or checks can contact our office for a receipt.

#aidswalkny



AIDS WALK NEW YORK IS SUNDAY, JULY 19th

Send in collected donations online during our AIDS Walk Live at Home event. If you'd like to send in physical donations, we recommend sending them a week prior so they can be processed in time for the event.

EARN FUNDRAISING AWARDS!

**IF YOU RAISE
\$150 OR MORE**

You will receive the official AIDS Walk New York T-shirt.

**IF YOU RAISE
\$500 OR MORE**

You will receive the above and the official AIDS Walk New York cap

**IF YOU RAISE
\$1,000 OR MORE**

You will become a Star Walker, and receive the above, plus the Star Walker Stainless Steel Tumbler.

To qualify for these awards, contributions must be received online or in the AIDS Walk office by 5 p.m. on Friday, July 31st, 2020.

To join the Star Walkers Club, simply log in at ny.aidswalk.net and set a goal to raise \$1,000 or more. Once you reach your goal, you will receive the award items above, in addition to a special Star Walker Lapel Pin and Crown to wear during the event.



MATCHING GIFTS CAN DOUBLE YOUR FUNDRAISING

You may be able to double your donations! Hundreds of companies match employee donations, so ask everyone who sponsors you if their company has a matching gift program. Also, check with your employer to see if they will match your own donations and/or the money you raise. You can search for any company's matching gift policy at ny.aidswalk.net/matching-gift-info. Please note that the Federal Tax Identification Number for GMHC is 13-3130146.

SUBMITTING DONATIONS

You can turn in your donations to the AIDS Walk office at any time. Be sure to include your name, so we can properly credit you.

Send donations to:

AIDS Walk New York, P.O. Box 7607, New York, NY 10116

Or submit donations online at:

<https://ny.aidswalk.net/Donate>

The bearer of this form	_____	The City of New York Department of Social Services License No. A-11423
	Signature of Solicitor	

	Name of Solicitor	

	Address of Solicitor	
is a duly authorized representative of	GMHC	Dates in force: Jan. 1, 2020 to July 31, 2020
	Name of Licensed Organization	
	307 West 38th Street New York, NY 10018	
	Address	
and is authorized to accept contributions in its behalf		Solicitation of Walkathon Pledges – New York City
	Chief Executive Officer	

In Cooperation with City of New York Parks & Recreation

The AIDS Walk New York office is here to help you!
awnyinfo@aidswalk.net
212.807.WALK • aidswalk.net