

IDF WALK FOR PRIMARY IMMUNODEFICIENCY

An initiative of the Immune Deficiency Foundation

IDF Walk for PI Walk-A-Thon Pledge Form

First Name: _____ Last Name: _____

I plan to walk at least _____ miles for IDF Walk for PI, an initiative of the **Immune Deficiency Foundation**.

Dear Potential Sponsor,

I am participating in **IDF Walk for PI**. All proceeds will help the Immune Deficiency Foundation continue to provide educational resources and programs at no cost to individuals and families, power critical patient-focused research, and lead the way in the fight to improve diagnosis and access to treatment for those affected by primary immunodeficiencies (PI). You can help me raise funds by sponsoring me for an amount I will walk per mile and you can name a maximum amount that you are willing to contribute. **After my walk, you can make the donation online to my personal fundraising campaign, or make the check payable to the Immune Deficiency Foundation. Please make sure the memo says IDF Walk for PI and indicates my name.** All contributions are tax-deductible.

Thank you!

Name of Sponsor	Pledge Per Mile (Ex. \$2.00)	Maximum Pledge	Total Amount Due
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2.			
3.			
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