

## **SNOW BOWL OFFLINE DONATION FORM**

## PLEASE COMPLETE AND MAIL WITH CHECK/MONEY ORDER:

First Name:		Last Name: _		
Email:				
Address Line 1:				
Address Line 2:				
City:				
State:	ZIP:			
Home Phone:			Work:	
Amount \$:	Check/Money Order			
			Make payable to Special Olymp	
Please credit my donation as follow	/s:			
General event donation - Sno	w Bowl			
Player or Team Donation				

Mail to: **SNOW BOWL** 

Special Olympics New Jersey 1 Eunice Kennedy Shriver Way Lawrenceville, NJ 08648

\*Donations are fully tax-deductible to the extent allowed by law.