Pledges for Walker: _____Church (if any):_____

Address:_____ Email:_____

On Saturday, Feb 25, 2023 I will be participating in a Walk for Life supporting Oasis Pregnancy Care Centers. **I hope you will help supporting them through me**.

Sponsor Name	Phone Number	Amount	Check or Cash	Paid or Pledge

(Walker: Record offline donations on your walk webpage and bring cash/checks to Oasis, or to the Walk)

For questions, contact: info@oasispregnancycenter.org or 813.406.4965

Scan QR code with phone camera for Walk Website: