PLUNGER TOOLKIT

PLUNGE PLEDGE FORM

If you have received cash or check donations, fill out this form and send with your cash and checks to **Special Olympics Maryland, Inc. Attn: Plunge P.O. Box 69507 | Baltimore, Maryland 21264-9507**

First: _____ Last: _____

Address: _____City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Participants must register online to receive their 2024 Plunge Sweatshirt. Please use this form to keep track of any offline donations that you would like added to your fundraising total online.

DONOR NAME	ADDRESS	PHONE NUMBER	AMOUNT
		TOTAL AMOUNT RAISED	

Special Olympics Maryland, Inc. Attn: Plunge *P.O. Box 69507, Baltimore, Maryland 21264-9507* | Phone: (410) 242-1515 | Fax: (410) 242-2580 | plunge@somd.org