

Annual Race to Erase MS
April 15, 2016
Hyatt Regency Century Plaza Hotel

GIFT BAG
PRODUCT DONOR CONFIRMATION FORM

Donor: _____
(PLEASE PRINT YOUR NAME ABOVE AS YOU WOULD LIKE IT TO APPEAR IN EVENT MATERIALS)

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Authorized By: _____ Title: _____

Product Name: _____

Quantity: _____ Cash Value: _____

Description: _____

Special Instructions: _____

Please fax, mail, or email Product Donor Form to:

RACE TO ERASE MS

Email: heather@erasems.org / Phone: 310-440-4842 / Fax: 310-471-4975

Once we receive confirmation of your donation, we will contact you regarding specific shipping instructions. Items will need to be received by March 31st.

Thank you for your generous contribution to the Race to Erase MS!