



PLEDGE SHEET

walk to
create a world
free of MS

Name _____

Street Address _____

City _____ State _____ Zip Code _____

Day Phone (_____) _____ Evening Phone (_____) _____

Email _____

Team Name _____ Team Captain Name _____

Sponsor Name	Address	Phone Number	Pledge	Amount Received

Total to be collected: _____



National
Multiple Sclerosis
Society
Kentucky
Southeast Indiana
Chapter

Mail your donations:
National Multiple Sclerosis Society
Kentucky-Southeast Indiana Chapter
1201 Story Avenue, Suite 200
Louisville, Kentucky 40206

Contact us:
800.873.6367 or 502-526-5303
Fax: 502.581.1010
www.walkmsky.org
Mary.carabella@nmss.org

*Reminder: Indicate your name on each check or donation.
Go to www.walkmsky.org to download additional pledge sheets.*