



Heartspring

DONATION FORM

Thank you for supporting the Heartspring Autism CARE Walk on Saturday, April 27!

With your generosity, the Heartspring Autism Services Program will be able to continually provide outreach training, consultations, and programs to support local individuals and their families impacted by autism. Together, we are making a lasting impact.



**THANK YOU
FOR YOUR
SUPPORT!**

| Donor Name | Mailing Address | Email | \$ Amount | Name of Individual or Team Donating to |
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| <p>Please mail or turn in donation form and cash or check donations to:</p> <p>Heartspring c/o Maija Noll 8700 E. 29th St. N. Wichita, KS 67226</p> | | <p><i>Please make all checks payable to Heartspring.</i></p> <p>Donations may also be turned in during T-shirt pickup hours in the Heartspring Conference Center. Please check the "Event Info" section on AutismCAREWalk.org for these dates and times.</p> | <p>\$ TOTAL</p> | |