

Lexington Truck Pull  
Donation Form



Please complete the form below:

Participant's Name \_\_\_\_\_

Participant's Team \_\_\_\_\_

\_\_\_ **Gold Medal Level (\$100+)**: Provides free sports physical & other health screenings for one athlete at MedFest

\_\_\_ **Silver Medal Level (\$75-\$100)**: Provides training for one athlete to be a Global Messenger

\_\_\_ **Bronze Medal Level (\$50-\$75)**: Provides one coach with training to lead a team.

\_\_\_ **Teammate Level (\$25-\$50)**: Provides one athlete one season of sports programming.

\_\_\_ **Other Amount** \_\_\_\_\_

**Donor Information**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Donor Phone \_\_\_\_\_ Donor Email \_\_\_\_\_

**Make Checks payable to: Special Olympics Kentucky**

Credit Card Type: \_\_\_ Visa \_\_\_ Mastercard \_\_\_ Discover Card \_\_\_ American Express

Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

CVV: \_\_\_\_\_ Signature: \_\_\_\_\_

**Please mail or email completed form to:**

**Mary Hummel**

Special Olympics Kentucky, 1230 S Hurstbourne Pkwy, Louisville, KY 40222 Suite 100,

Phone: 502-326-5002; Email: [mhummel@soky.org](mailto:mhummel@soky.org)

**Federal Tax ID #: 61-095457-1**