

Collect Sponsors

- **Walkers:** Set a goal to raise \$150, \$250, \$500, \$1500 or even more!
- Enlist sponsors to support your fundraising goal and keep track of their information on this form.
- Walkers who raise \$250 will earn an entry into a drawing to win a prize! Further increments of \$250 will earn additional entries!
- Visit living-well.org or scan the QR code on the front of this pamphlet to download & print out more of our sponsor forms.
- **Sponsors** can give cash, checks, or donate online for any amount.
- Make checks payable to: "LivingWell Pregnancy Centers."

Raise \$100, Get a free T-Shirt!

Collecting sponsors is vital to your participation in this event!

Our Mission

To equip women and their families with unplanned pregnancies to make life affirming and informed choices through a foundation of truth and hope.

Services

Pregnancy Testing	Educational Classes
Material Supplies	Post-Abortion Counseling
Adoption Referrals	Community Referrals
Ultrasounds	Mentor Moms



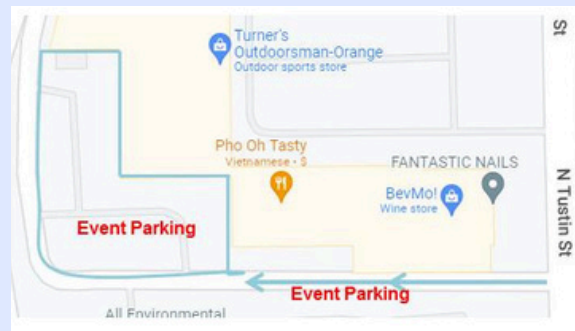
WALK FOR LIFE

LivingWell Pregnancy Centers

Have a completed form (11 sponsorships) at check-in to be entered into a drawing. Multiple completed forms means multiple chances to win a prize!!!

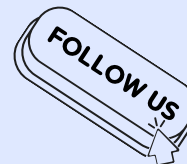


Parking



Contact Us!

714-637-9664
hope@living-well.org
@livingwellpregnancy
@livingwellpregnancycenters



Saturday, March 7, 2026

Walk-Up Registration Opens: 8:30am

Walk Start Time: 9:30am

Location: LivingWell Parking Lot
(2010 N. Tustin St, Orange, CA 92865)

Parking is located behind building

Download Sponsor Form

 living-well.org

 714-637-9664



To make online donations, scan
the QR code or visit living-well.org



My Fundraising Goal_____

Walkers Name: _____

Address: _____

City _____ St _____ Zip _____

Email _____

Phone: _____

Sponsors

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Online: _____

Amount: _____ Phone: _____

Email: _____

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Online: _____

Amount: _____ Phone: _____

Email: _____

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Online: _____

Amount: _____ Phone: _____

Email: _____

Sponsor Form

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Online: _____

Amount: _____ Phone: _____

Email: _____

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Online: _____

Amount: _____ Phone: _____

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First _____ Last _____

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Amount: _____ Phone: _____

Email: _____

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Online: _____

Amount: _____ Phone: _____

Email: _____

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Online: _____

Amount: _____ Phone: _____

Email: _____

FOR STAFF USE

Staff Initials _____

Total Cash \$ _____ Total Checks \$ _____

Online \$ _____

Total Donations \$ _____

**We do not bill pledges, so be sure to
collect all your cash/checks prior to
event.**

Please print all information very
clearly. This enables us to provide a
tax-deductible receipt for each
donation

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Online: _____

Amount: _____ Phone: _____

Email: _____

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Online: _____

Amount: _____ Phone: _____

Email: _____

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Online: _____

Amount: _____ Phone: _____

Email: _____