



I/we want to participate in the 2008 Buddy Walk. Please see my area(s) of interest indicated below and respond accordingly. Thank You!

Business: _____

Contact Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____ Fax: _____

Email: _____

_____ Donated an Auction/Raffle

_____ Donate an In-kind Item (ex.: water, food, signage, printing, etc.)

_____ I am interested in forming a team. Please send a Team Captain Kit.
I estimate _____ walkers on my team.

_____ I am interested in being a vendor at the walk. Please send information.

_____ I am interested in being a sponsor. Please send information.

Description of Product/Service being donated:

Estimated Retail Value: _____

Donation is: _____ In the form of a Certificate _____ Actual Product

_____ Please call me to make arrangements to pick up my donation

_____ I will mail or deliver the donation to your office

Down Syndrome Organization of Southern Nevada
5300 Vegas Drive, Las Vegas, NV 89108
For More Information on
the Buddy Walk please call: 702-648-1990 or
visit our website at www.dsosn.org
Your donation is tax-deductible to the extent allowed by law.
DSOSN is a non-profit 501(c)(3) organization. FED ID # 94-3040560