



Sleep Out: Check Donation Form

Participant Information:

Participant Name: Brian Reavey Participant ID: 16110
Team Name: Team ID:
Event Name: Sleep Out: Stage & Screen Event ID: 733

Please indicate your donation amount below:

\$1,000 \$500 \$250 \$100 \$50 Other Amount

Please make your check payable to: Covenant House International

Remember to put the Participant's Name in the memo section of your check.

Donor Information (Please fill in your information below):

Name:		
Address:		
City:	State/Province:	Zip/Postal Code:
Email Address:	Phone Number:	

How would you like your name to be displayed?

Check here if you wish to remain anonymous

Please mail in this complete form, along with your check or cash, to your local Covenant House Office at the address below and notify the participant that you are making a donation on their behalf.

Please make your check payable to: Covenant House International

Thank You for Your Donation!

Covenant House International
5 Penn Plaza, Floor 3
New York, New York 10001
212-727-4990