



## Fundraising Donation Submission Form

**Instructions:**

Please make all checks payable to "Arthritis Foundation".

Mail this completed form with all donations to:

Arthritis Foundation – Attn: Accounts Receivable  
1355 Peachtree Street, NE  
Suite 600  
Atlanta, GA 30309

*\*Please allow a minimum of 7-10 days after receipt for processing.*

**Your information:**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Participant/Team Name (if applicable):** \_\_\_\_\_

**Event Name (including city):** \_\_\_\_\_

*Please do not mail cash.* Collect cash donations and submit an online donation on your fundraising page for the amount or convert all cash donations to a consolidated money order or check.

**Questions?** Contact us at: [helpline@arthritis.org](mailto:helpline@arthritis.org) or at 1-800-283-7800

Double or (Triple) the impact of your donation through matching gifts!  
Visit <http://www.arthritis.org/matchinggift> to find out more!