



**GO THE DISTANCE FOR AUTISM BIKE EVENT -
Offline Donation Form**

Thank you for supporting me as I participate in the “Go the Distance for Autism” Ride. I am riding to support autism education in Northern NJ and your generosity is so important to helping me reach my goal.

TO BE COMPLETED BY RIDER/TEAM CAPTAIN

Rider’s Name: _____

Team Name: _____

Which school are you riding for? (Please circle one)

All 4 Schools Alpine Learning Group The EPIC School Garden Academy REED Academy

TO BE COMPLETED BY DONOR

Attached is my contribution of \$_____ to the “Go the Distance for Autism” Ride.

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Please include your phone number and email address in case we need to contact you about your donation. This information will not be shared with outside parties.

Name as it should appear on rider’s page: _____

Check here if you would like your donation to be anonymous.

Please make checks payable to the school designated by the rider above and mail to the appropriate school address below. If the rider or team will be supporting All 4 Schools, please make the check payable and mail to EPIC.



238 Farview Avenue
Paramus, NJ 07652



REED Academy
25 Potash Road
Oakland, NJ 07436



Alpine Learning Group
777 Paramus Road
Paramus, NJ 07652



Garden Academy
627 Mt. Pleasant Avenue
West Orange, NJ 07052