



I want to make a donation to support a 2021 Santa Cruz Plunge participant!

PARTICIPANT'S NAME: _____

Donation Amount

\$500 \$250 \$100 \$25 Other Amount: _____

Please make your check payable to Special Olympics.

Name: _____

Address: _____

City: _____ State: _____

Zip Code: _____ Phone: _____

Email: _____

Thank you so much for your contribution!

Mail this form and your check payable to Special Olympics to:

Special Olympics
3480 Buskirk Ave., #340
Pleasant Hill, CA 94523

Special Olympics Northern California & Nevada is a 501(c)3 organization.

Employer Identification Number 68-0363121.

Your gift is tax deductible to the extent allowed by law.