

# FUNDRAISING FORM



Participant Name \_\_\_\_\_

Organization Name \_\_\_\_\_

Fundraiser Deadline \_\_\_\_\_

Name	Address + Phone Number	Coupon #		Total \$
			x \$10	
			x \$10	
			x \$10	
			x \$10	
			x \$10	
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			x \$10	
			x \$10	
			x \$10	
			x \$10	

[TIDALWAVEAUTOSPA.COM](http://TIDALWAVEAUTOSPA.COM) | 706.481.2629

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