

**American Cancer Society
Offline Donation Form**

Participant Information

Event Name: Relay For Life of Rahway

Participant Name: Mother Seton

Participant Cons ID: 44790913

Team Name: Mother Seton Setters for Survival

Please Indicate Your Donation Amount Below:

\$500 \$250 \$100 \$50 \$25 Other Amount: _____

Please make your checks payable to: American Cancer Society

Donor Information

Name: _____

Address: _____

City: _____ **State/Province:** _____

Zip/Postal Code: _____

Country: _____

Phone Number: _____

Email Address: _____

Thank You So Much For Your Contribution!

Please mail this completed form, along with your check, to your local American Cancer Society Office at the address below. Please be sure to notify the participant that you are making a contribution on their behalf and sending it to the local American Cancer Society office.

American Cancer Society
ATTN: Vicky Allen - Relay For Life of Rahway
2310 Rt 34 Ste 1D
Manasquan, NJ 08736

The American Cancer Society cares about your privacy and protects how we use your information. Your information will help us better serve your needs and the needs of your community, and we do not sell your information to third parties. For questions about our privacy policy, please visit www.cancer.org.