

My Sponsors

Supporting the Cause for Life

OFFICE USE ONLY	
TOTAL _____	REGISTERED BY _____
PAID _____	PARTICIPANT _____
T-SHIRT <input type="checkbox"/> YES <input type="checkbox"/> NO	CHURCH, ORG, CO _____

Do I have to collect money?

Yes. Winners are determined by donations received on or before the event on March 21, 2026.

What forms of payment are accepted?

Cash, checks (payable to TKRL), and Venmo @TulareKingsResourcesforLife

What if I can't attend the walk?

Registration and donor forms may be mailed to P.O. Box 3531, Visalia, CA 93277.

PARTICIPANT INFORMATION	
NAME (FIRST, LAST) _____	PHONE _____
ADDRESS _____	
CITY _____	STATE _____ ZIP _____
EMAIL ADDRESS _____	

PLEASE PRINT CLEARLY (Please make all checks payable to TKRL)

DONOR INFORMATION (Please print clearly)	
NAME (FIRST, LAST) _____	PHONE _____
ADDRESS _____	
CITY _____	STATE _____ ZIP _____
EMAIL ADDRESS _____	
<i>Please make checks payable to TKRL</i>	
<input type="checkbox"/> \$25 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 OTHER \$ _____	<input type="checkbox"/> PAID CK # _____ <input type="checkbox"/> CASH AMT \$ _____

DONOR INFORMATION (Please print clearly)	
NAME (FIRST, LAST) _____	PHONE _____
ADDRESS _____	
CITY _____	STATE _____ ZIP _____
EMAIL ADDRESS _____	
<i>Please make checks payable to TKRL</i>	
<input type="checkbox"/> \$25 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 OTHER \$ _____	<input type="checkbox"/> PAID CK # _____ <input type="checkbox"/> CASH AMT \$ _____

DONOR INFORMATION (Please print clearly)	
NAME (FIRST, LAST) _____	PHONE _____
ADDRESS _____	
CITY _____	STATE _____ ZIP _____
EMAIL ADDRESS _____	
<i>Please make checks payable to TKRL</i>	
<input type="checkbox"/> \$25 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 OTHER \$ _____	<input type="checkbox"/> PAID CK # _____ <input type="checkbox"/> CASH AMT \$ _____

DONOR INFORMATION (Please print clearly)	
NAME (FIRST, LAST) _____	PHONE _____
ADDRESS _____	
CITY _____	STATE _____ ZIP _____
EMAIL ADDRESS _____	
<i>Please make checks payable to TKRL</i>	
<input type="checkbox"/> \$25 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 OTHER \$ _____	<input type="checkbox"/> PAID CK # _____ <input type="checkbox"/> CASH AMT \$ _____

DONOR INFORMATION (Please print clearly)	
NAME (FIRST, LAST) _____	PHONE _____
ADDRESS _____	
CITY _____	STATE _____ ZIP _____
EMAIL ADDRESS _____	
<i>Please make checks payable to TKRL</i>	
<input type="checkbox"/> \$25 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 OTHER \$ _____	<input type="checkbox"/> PAID CK # _____ <input type="checkbox"/> CASH AMT \$ _____

DONOR INFORMATION (Please print clearly)	
NAME (FIRST, LAST) _____	PHONE _____
ADDRESS _____	
CITY _____	STATE _____ ZIP _____
EMAIL ADDRESS _____	
<i>Please make checks payable to TKRL</i>	
<input type="checkbox"/> \$25 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 OTHER \$ _____	<input type="checkbox"/> PAID CK # _____ <input type="checkbox"/> CASH AMT \$ _____

PLEASE PRINT CLEARLY (Please make all checks payable to TKRL)

DONOR INFORMATION (Please print clearly)

NAME (FIRST, LAST) _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS _____

Please make checks payable to TKRL

\$25 \$50 \$100 OTHER \$ _____ PAID CK # _____ CASH AMT \$ _____

DONOR INFORMATION (Please print clearly)

NAME (FIRST, LAST) _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS _____

Please make checks payable to TKRL

\$25 \$50 \$100 OTHER \$ _____ PAID CK # _____ CASH AMT \$ _____

DONOR INFORMATION (Please print clearly)

NAME (FIRST, LAST) _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS _____

Please make checks payable to TKRL

\$25 \$50 \$100 OTHER \$ _____ PAID CK # _____ CASH AMT \$ _____

DONOR INFORMATION (Please print clearly)

NAME (FIRST, LAST) _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS _____

Please make checks payable to TKRL

\$25 \$50 \$100 OTHER \$ _____ PAID CK # _____ CASH AMT \$ _____

DONOR INFORMATION (Please print clearly)

NAME (FIRST, LAST) _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS _____

Please make checks payable to TKRL

\$25 \$50 \$100 OTHER \$ _____ PAID CK # _____ CASH AMT \$ _____

DONOR INFORMATION (Please print clearly)

NAME (FIRST, LAST) _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS _____

Please make checks payable to TKRL

\$25 \$50 \$100 OTHER \$ _____ PAID CK # _____ CASH AMT \$ _____

DONOR INFORMATION (Please print clearly)

NAME (FIRST, LAST) _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS _____

Please make checks payable to TKRL

\$25 \$50 \$100 OTHER \$ _____ PAID CK # _____ CASH AMT \$ _____

DONOR INFORMATION (Please print clearly)

NAME (FIRST, LAST) _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS _____

Please make checks payable to TKRL

\$25 \$50 \$100 OTHER \$ _____ PAID CK # _____ CASH AMT \$ _____