

## Sign-up Form

*Please indicate below how you wish to help PACS:*

\$ \_\_\_\_\_ per mile (\$.01/ mile = \$61.31)

Fixed Donation \$ \_\_\_\_\_

Other

*I will fulfill my above pledge when the ride is complete. Please contact me at that time.*

*I will fulfill my pledge today. My payment is enclosed.*

Check

Visa                       MasterCard

Card # \_\_\_\_\_

Exp. \_\_\_\_\_/\_\_\_\_\_

Date \_\_\_\_\_

Signature

Name

Address

Phone

E-mail

Please mail this form to:

**Portland Adventist Community Services**

11020 NE Halsey  
Portland, OR 97220

Or donate online: [www.portlandacs.org](http://www.portlandacs.org)  
(mention "ride for hunger" in the comments)

Phone: (503) 252-8500  
Fax: (503) 257-2884