

# Sponsor Form

## Running for a Change *runningforachange.com*

Please complete this form and mail with your check or credit card information to:

Juvenile Diabetes Research Foundation  
1640 Lelia Drive, Suite 130  
Jackson, MS 39216

Juvenile Diabetes Research Foundation  
14 Office Park Circle  
Birmingham, AL 35223

Name (First, Last): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip : \_\_\_\_\_

Amount Pledged: \_\_\_\_\_

In Memory/Honor of: \_\_\_\_\_

Payment Type: \_\_\_\_\_ (*Check or Credit Card*)

Check Number: \_\_\_\_\_

Credit Card Type: \_\_\_\_\_ (*M/C, Visa, etc.*)

Credit Card Number: \_\_\_\_\_

Security Code: \_\_\_\_\_ (*3 digit number on back of credit card*)

Card Expiration Date: \_\_\_\_\_ (*Month/Year*)

