YOU CAN ALSO REGISTER OR FIND ADDITIONAL PLEDGE SHEETS AT WWW.SOOR.ORG/PLUNGE - IT'S EASY!

POLAR PLUNGE REGISTRATION

FIRST NAME: _____ MIDDLE INITIAL: _____ LAST NAME: _____

STREET ADDRESS: _____ CITY: _____

COUNTY: _____ STATE: _____ ZIP: _____ E-MAIL: _____

PHONE: (____)_____ HOW DID YOU HEAR ABOUT US?: _____

COMPANY • LAW ENFORCEMENT AGENCY • HIGH SCHOOL NAME: _____

TEAM NAME: _____ T-SHIRT SIZE: ___ S ___ M ___ L ___ XL ___ 2-XL ___ 3-XL

SELECT PLUNGE LOCATION

☐ **PORTLAND** (1.30.10) ☐ **MEDFORD** (2.06.10) ☐ **EUGENE** (2.20.10) ☐ **CORVALLIS** (2.20.10) ☐ **BEND** (2.26.10)

FAX REGISTRATION TO 503.248.0603, REGISTER AT WWW.SOOR.ORG/PLUNGE OR SEND YOUR REGISTRATION TO:
SPECIAL OLYMPICS OREGON, ATTN: POLAR PLUNGE, 5901 SW MACADAM SUITE 200, PORTLAND, OR 97239

DONATION FORM

SUBMIT CASH AND CHECKS WITH THIS FORM TO RECEIVE CREDIT FOR MONEY NOT RAISED ONLINE.

DONOR INFORMATION	DONATION AMOUNT	DONOR INFORMATION	DONATION AMOUNT
NAME		NAME	
ADDRESS		ADDRESS	
NAME		NAME	
ADDRESS		ADDRESS	
NAME		NAME	
ADDRESS		ADDRESS	
NAME		NAME	
ADDRESS		ADDRESS	
NAME		NAME	
ADDRESS		ADDRESS	
NAME		NAME	
ADDRESS		ADDRESS	
TOTALS $		TOTALS $	

IF YOUR DONOR'S SEND MONEY DIRECTLY TO SPECIAL OLYMPICS, PLEASE MAKE SURE THEY INCLUDE THE NAME OF THE PLUNGER THEY ARE SUPPORTING.