



Jupiter Children's Foundation

## *Donation form*

***Sponsor:*** \_\_\_\_\_

**Name of Contact Person:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Fax Number:** \_\_\_\_\_

**Amount:** \_\_\_\_\_

**Thank you for your participation in this year's Jupiter Invitational. We can't do it without you.**

**Todd Willson, Tournament Director**

**Maria Marino, Honorary Chairwoman**

**Please make your **Donation check** payable to the Jupiter Children's Foundation and mail it to:**



Jupiter Children's Foundation  
c/o West Jupiter Community Group  
(DBA Edna W Runner Tutorial Center)  
7187 Church Street  
Jupiter, FL 33458

**Phone: 561-328-5500**