

Collect Sponsors

- Set a goal to raise \$150, \$250, \$500, \$1500 or even more!
- Sponsors can give cash or checks for any amount. Make checks out to: LivingWell Pregnancy Centers.
- Visit living-well.org or scan the QR code below to download and print our sponsor form.



SCAN ME

Raise \$100, Get a free Shirt!

- Collecting sponsors is vital to your participation in this event!



Our Mission

Our mission is to equip women and their families with unplanned pregnancies, to make life affirming and informed choices through a foundation of truth and hope.

Services

Pregnancy Testing Educational Classes
Material Supplies Post-Abortion Counseling
Adoption Referrals Community Referrals
Ultrasounds Confidential Counseling



LivingWell
PREGNANCY CENTERS

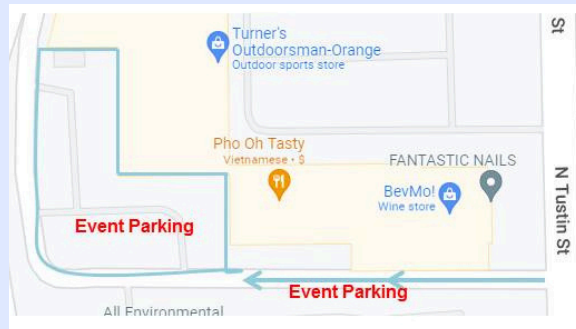
LIVINGWELL WALK FOR LIFE

PREGNANCY CENTERS

Every \$500 raised enters you in a drawing to win \$500!

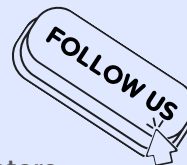


Parking



Contact Us!

- ☎ 714-637-9664
- ✉ hope@living-well.org
- 📷 @livingwellpregnancy
- 📺 @livingwellpregnancycenters



Saturday, February 22, 2025

Walk-Up Registration Opens: 8:30am

Walk Start Time: 9:30am

Location: LivingWell Parking Lot
(2010 N. Tustin St, Orange, CA 92865)

Parking located behind building

Register Today!

Download Sponsor Form

🌐 living-well.org

☎ 714-637-9664



SCAN ME

Sponsor Form

To make online donations, scan the QR code or visit living-well.org



My Fundraising Goal _____

Walkers Name: _____

Address: _____

City _____ St _____ Zip _____

Email _____

Phone: _____

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Amt: _____

Online _____ Phone: _____

Email: _____

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Amt: _____

Online _____ Phone: _____

Email: _____

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Amt: _____

Online _____ Phone: _____

Email: _____

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Amt: _____

Online _____ Phone: _____

Email: _____

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Amt: _____

Online _____ Phone: _____

Email: _____

FOR STAFF USE

Staff Initials _____

Total Cash \$ _____ Total Checks \$ _____

Online \$ _____

Total Donations \$ _____

We do not bill pledges so be sure to collect all your cash/checks prior to event.

Please print all information very clearly. This enables us to provide a tax-deductible receipt for each donation

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Amt: _____

Online _____ Phone: _____

Email: _____

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Amt: _____

Online _____ Phone: _____

Email: _____

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Amt: _____

Online _____ Phone: _____

Email: _____

First _____ Last _____

Address _____

City _____ St _____ Zip _____

Cash _____ Check# _____ Amt: _____

Online _____ Phone: _____

Email: _____