



Best Buddies Challenge Offline Donation Form

Please complete and print this form. You may return it to the individual you are supporting, or mail your completed form and donation to the address below.

Best Buddies Challenges 100 SE Second Street, Suite 2200 Miami, FL 33131 Attn: Alan Sakell

REQUIRED: Please circle the Challenge you are supporting:

Hyannis Port

California

Miami

| I am supporting(Participant/Team Name | 's fundraising efforts for Best Buddies by donating |
|---|---|
| \$ towards their fundraising | goal. |
| Check enclosed: Check Number (Please make checks payable to "Best Buddies") | |
| Please charge my Visa/Master0 | Card/Amex/Discover |
| Please print clearly | Donor Information |
| Card Number: | Full Name: |
| Card Type: | |
| Expiration Date: | City, State, Zip: |
| CVV Code: | |
| Cardholder Name: | Phone: |
| Cardholder Signature: | Email: |
| | (required if a donation receipt is desired) |

Funds raised through the *Best Buddies Challenges* benefit Best Buddies International (a 501(c)(3) non-profit organization Tax ID: 52-1614576) the world's largest organization dedicated to ending the social, physical and economic isolation of the 200 million people with intellectual and developmental disabilities (IDD). Our programs empower the special abilities of people with IDD by helping them form meaningful friendships with their peers, secure successful jobs, live independently, improve public speaking, self-advocacy and communication skills, and feel valued by society.