

## Medical Needs Foundation



The Medical Needs Foundation (MNF), a 501(c)(3) non-profit organization, assists families and individuals who face overwhelming expenses

due to a debilitating health condition. The signature event of the Medical Needs Foundation is the **Spirit 5K**. This is the 12th year the **Spirit 5K** offers you the opportunity to reach out to families facing formidable challenges due to illness, disease and other health conditions.



The **Spirit 5K** is held first and foremost to honor the courage shown by those battling serious illness. However, it also reflects the dedication and compassion shown by the participants, volunteers, beneficiaries and sponsors who are ready to donate their time, money and effort to help their neighbors in need. Thanks to all who participate and donate, the Medical Needs Foundation will continue to make a difference in the lives of its many beneficiaries.

To honor your commitment to the **Spirit 5K**, the Medical Needs Foundation will distribute more than 90% of all funds raised to its beneficiaries.

# Celebrating 12 Years of Spirit Spirit 5K We Run as One.

**October 25, 2009 • Race starts 3:00 pm**

The real competition in this event is not for speed but for money raised.

A team is a group of individuals who join together to raise money for the MNF.

If you would like to captain or join a pledge team, contact Carol Marozik, 973.402.8133.

**Please help us reach our goal of \$150,000 by inviting a friend to register with you!**

### REGISTRATION

Name \_\_\_\_\_ Team Captain (if applicable) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone (H) \_\_\_\_\_ Phone (W) \_\_\_\_\_  
 My fundraising goal is: \$ \_\_\_\_\_

### PLEDGE FORM

Registration Fee • Student/Senior \$25 • Adult \$75 • Family \$150

Donor	Address / Phone	\$ amount	rec'd	MC/VISA# exp date
My own sponsorship			<input checked="" type="checkbox"/>	exp. / /
			<input type="checkbox"/>	exp. / /
			<input type="checkbox"/>	exp. / /
			<input type="checkbox"/>	exp. / /
			<input type="checkbox"/>	exp. / /
			<input type="checkbox"/>	exp. / /
			<input type="checkbox"/>	exp. / /
			<input type="checkbox"/>	exp. / /
			<input type="checkbox"/>	exp. / /

Total pledged: \$ \_\_\_\_\_  
 Enclosed are pledge payments totaling: \$ \_\_\_\_\_

- Please make checks payable to Medical Needs Foundation, PO Box 303, Mountain Lake, NJ 07095. Do not mail cash.
- Make a copy of your pledge form for your records, and if you wish for your sponsors.
- Remember to ask about your employer's Matching Gift Program. See [www.medicalneedsfoundation.org](http://www.medicalneedsfoundation.org) for more details.
- Donations can be made through United Way by writing a check to United Way and marking it for the benefit of MNF, with address, or by specifying MNF in your United Way pledge. Please note any United Way commissions on the Spirit 5K pledge form above.
- All pledge payments are tax deductible. Tax ID #22-35995-04