



## Walk Items Order Form



**A Cure For Tomorrow  
Cureband – \$5**

**Crew Neck Tee**  
**Adult Sizes S, M, L, XL – \$20**  
**Child Sizes S, M, L – \$15**

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

	Size	Quantity	Price	Subtotal (\$)
Crew Neck Tee (Adult)	_____	_____	\$20	_____
Crew Neck Tee (Child)	_____	_____	\$15	_____
Cureband	_____	_____	\$5	_____
<b>Total Order Amount :</b>				_____

Please make check payable to "Children's Cardiomyopathy Foundation" and mail to P.O. Box 547, Tenafly, NJ 07670. For questions, please email Jennifer Hivry at [jhivry@childrenscardiomyopathy.org](mailto:jhivry@childrenscardiomyopathy.org).