



### ALYN Wheels of Love

The International Charity Bike Ride for the benefit of the Children of ALYN Hospital.

## Check Donation Form

**Receipt type required (please select one) and make check payable to the underlined name in brackets:**

- Canadian receipt (**Friends of ALYN Canada**)
- French receipt (**Amis D'ALYN**)
- Holland receipt (**Stichting Vrienden van Het ALYN Hospital**)
- Israeli receipt (**ALYN Hospital**)

(Clearly print information below in English or Hebrew according to the language in which you would like to receive your receipt).

- U.K. receipt (**Friends of ALYN London**)
- U.S.A. receipt (**American Friends of ALYN Hospital**)

**Donor information (for clarity, please use CAPITAL letters):**

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

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

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

Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

Tel. Home: \_\_\_\_\_ Mobile: \_\_\_\_\_

YOUR generosity truly makes a difference in enabling us to  
continue to assist

ALYN's **EXTRA**ordinary children to do **ORDINARY** things!

**Sponsoring:** \_\_\_\_\_ (Name of participant / team)

\_\_\_\_\_

I have enclosed a check in the **amount** of: \_\_\_\_\_ **currency**\_\_\_\_\_