

Little Flower  
Educational Child Care  
An Early Learning Center



Walk of Love

Name of Child \_\_\_\_\_  
Name of Parent \_\_\_\_\_  
Sponsor (please print) \_\_\_\_\_  
Relationship to child \_\_\_\_\_  
Sponsor Address \_\_\_\_\_  
\_\_\_\_\_

Sponsor Amount \$ \_\_\_\_\_ Date \_\_\_\_\_

☐ Cash ☐ Check

Contributions are Tax Deductible [Tax ID# 95-6122864]

Checks payable to **Little Flower Educational Child Care**

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