



HUMANE
Society of Louisiana

Humane May Walk Pledge Form

PARTICIPANT NAME & DETAILS

Name: _____

Address: _____

Phone: _____

Email: _____

Address: _____

City/State/Zip: _____

PLEDGES COLLECTED

Name

Email (for receipt if needed)

Amount

Please return to: Humane Society of Louisiana,
PO Box 740321, New Orleans LA 70174