EPILEPSY FOUNDATION
END EPILEPSY TOGETHER

TEAM FUNDRAISING CREDIT FORM

TEAM CAPTAIN NAME

TEAM NAME

EVENT NAME AND LOCATION (City, State)

Team Captain: Use this form when submitting a check with a lump sum for team or group fundraisers to ensure that all registered team members receive their share of the fundraising credit.
For example, if five team members host a bake sale that raises $500, write down that each team member receives credit for raising $100 (unless another amount is agreed upon).

TEAM MEMBER NAME*	AMT TO CREDIT TEAM MEMBER
TOTAL DONATION AMOUNT	$

*If a team member is not registered, their donations will be counted as a general team donation. Please make checks payable to Epilepsy Foundation.