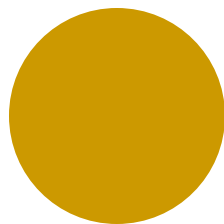


You can honor a Special Olympics athlete volunteer, coach or family member by purchasing a medallion in their name to be displayed on The Champions' Tribute Wall.



Champions' Tribute Wall



Special Olympics Massachusetts

450 Old Maple Street Building I
Danvers, MA 01923

Phone: 978-774-1501

Fax: 978-750-4686

www.specialolympicsma.org

At the
Yawkey Sports Training Center



Inspiring Greatness at Special Olympics Massachusetts



Special Olympics Massachusetts provides more than just gold medals to over 11,500 athletes, who participate in year round sports training and competition. Special Olympics Massachusetts encourages a healthy lifestyle. It fosters courage, confidence, friends and incredible experiences to the participants, volunteers, coaches and family members. The commitment of our volunteers, the valor of our athletes, and the skills of our coaches make Special Olympics the largest and most successful amateur sports organization in the world.

These individuals, worthy of recognition, will be distinguished on *The Champions' Tribute Wall*, a one-of-a-kind tribute to be displayed in the Yawkey Sports Training Center gymnasium as a stunning work of art.

In recognition of the important work of Special Olympics Massachusetts, we ask you to make a tax-deductible gift of \$500 in support of *The Champions' Tribute Wall*, to further the mission and ensure the ongoing and long-term program needs for the Special Olympics Massachusetts family.

Champions 'Tribute Wall Reply Card

My gift will be paid in full with the enclosed payment of \$ _____; or within 1 year period for # _____ of Medallion(s) for a gift of \$500 each.

I understand the Tribute Medallions will not be displayed until full payment is received

Please Indicate:

Name of honoree as it is to be displayed on Medallion

Name of donor as it is to be displayed on Medallion

Name

Billing Address

City, State and Zip code

Phone

Email address

My pledge payment qualify for a matching gift and I will submit the necessary notification to the company.

Company name

Method of Payment

Check

MasterCard

Visa

American Express

Discover

Credit Card #

Exp. date

Signature and Date

**Please return
this document
and make all
pledge payment
payable to:**

**Special Olympics
Massachusetts**

Attn Danielle Maxwell
450 Old Maple Street Building I
Danvers, MA 01923

Phone: 978-774-1501 x 245

Fax: 978-750-4686

Danielle.Maxwell@Special

OlympicsMA.org