



Donation / Team Division Form

The Donation / Team Division Form helps ensure your team contributions are accurately distributed among your team members for minimum fundraising requirements and prize purposes.

Requestor's (or Team Captain's) Name: _____

Team Name: _____

INSTRUCTIONS:

1. Complete and include this form with the contributions to be divided. (*NOTE: Only confirmed donations will be divided.*)

2. Only team captain (or team member whose funds are being credited FROM) can authorize distribution.

3. Submit pledges no later than Packet-Pick Up to:

National MS Society – South Florida Chapter
 Bike MS
 3201 West Commercial Blvd., Suite 127
 Fort Lauderdale, FL 33309

TOTAL to be Distributed	\$
--------------------------------	----

Credit FROM Team Member <i>(Please enter name of team member)</i>	Credit TO Team Member <i>(Please enter name of team member)</i>	Amount Credited
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
TOTAL DISTRIBUTED:		\$

Signature: _____

I authorize the National Multiple Sclerosis Society, South Florida Chapter to divide the aforementioned contributions to the respective team member(s).