



*You Can Make A Difference! . . . In the Lives of Prisoners*

# We Care Read-A-Thon

*Supports Missionary Prison Chaplaincy Workers*

Here's How It Works...

- 1 Complete reader information form below. (please print) **Set your goals.** (other side)
- 2 Ask family and friends to sponsor your reading efforts. (per page or donation)
- 3 Collect the books you want to read. (age appropriate please)
- 4 Beginning July 1, READ, READ, READ! (As you finish each book, note finish date on reading list form.)  
You must finish reading books by July 31. (Or read for any 31 consecutive day period between June 1 and July 31).
- 5 Beginning August 1, collect pledges from sponsors in the form of a check or money order made out to WE CARE PROGRAM. After collecting all pledges, put in envelope along with PLEDGE FORM and send to:

*We Care Program, 3493 Highway 21, Atmore AL 36502*

- 6 After We Care Program receives your pledges, we will send a receipt to your sponsors for their tax-deductible gifts. (checks and money orders only)
- 7 Pledges received by August 31 will qualify reader to be eligible for prizes.  
(gift certificates to Christian Book Distributors)  
Ages up to 12 - Most money raised - 1<sup>st</sup> place \$50 gift certificate, 2<sup>nd</sup> place \$25 gift certificate  
Ages 13 to 17 - Most money raised - 1<sup>st</sup> place \$50 gift certificate, 2<sup>nd</sup> place \$25 gift certificate  
Ages 18 and up - Most money raised - 1<sup>st</sup> place \$50 gift certificate, 2<sup>nd</sup> place \$25 gift certificate
- 8 All readers collecting over \$150 in pledges will receive a free T-Shirt from We Care Program.

*Questions? Call Noreen at We Care Program 251-368-8818*

## We Care Read-A-Thon

## *Reader Info*

Beginning Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Reader's Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Church: \_\_\_\_\_

T-Shirt Size (If raised over \$150) *Please check one size*

Youth Medium     Youth Large     Adult Small     Adult Medium     Adult Large     Adult X-Large

Feel free to make additional copies of this form as needed.

# We Care Read-A-Thon

## *Sponsor List*

| Sponsor's Name   | Amount Per Page | or | Donation | Money Collected             |
|--|-----------------|----|----------|-----------------------------|
| 1.   |                 |    |          |                             |
| 2.   |                 |    |          |                             |
| 3.   |                 |    |          |                             |
| 4.   |                 |    |          |                             |
| 5.   |                 |    |          |                             |
| 6.   |                 |    |          |                             |
| 7.   |                 |    |          |                             |
| 8.   |                 |    |          |                             |
| 9.   |                 |    |          |                             |
| 10.  |                 |    |          |                             |
| 11.  |                 |    |          |                             |
| 12.  |                 |    |          |                             |
| 13.  |                 |    |          |                             |
| 14.  |                 |    |          |                             |
| 15.  |                 |    |          |                             |
| (use another sheet for additional sponsors) <b>My Goal:</b> \$ _____ |                 |    |          | Total Money Collected _____ |

# We Care Read-A-Thon

## *Reading List*

| Book Title   | # of Pages/Date Completed | Book Title             | # of Pages/Date Completed |
|--|---------------------------|------------------------|---------------------------|
| 1.   |                           | 13.                    |                           |
| 2.   |                           | 14.                    |                           |
| 3.   |                           | 15.                    |                           |
| 4.   |                           | 16.                    |                           |
| 5.   |                           | 17.                    |                           |
| 6.   |                           | 18.                    |                           |
| 7.   |                           | 19.                    |                           |
| 8.   |                           | 20.                    |                           |
| 9.   |                           | 21.                    |                           |
| 10.  |                           | 22.                    |                           |
| 11.  |                           | 23.                    |                           |
| 12.  |                           | 24.                    |                           |
| (use another sheet for additional books) <b>My Goal:</b> _____ books |                           | Total Pages Read _____ |                           |