



**Pennsylvania Athletic Trainers' Political Action
Committee Pledge Card**

Name: _____

Home address: _____

City _____ State _____ Zip Code _____

Phone: _____ Email: _____

Occupation: _____ Name of Employer: _____

Please indicate the donation to the Pennsylvania Athletic Trainers' Political Action Committee

- | | | |
|--|--|--------------------------------|
| <input type="checkbox"/> Cash (please do not mail cash) | <input type="checkbox"/> Credit/Debit Card | <input type="checkbox"/> Check |
| <input type="checkbox"/> \$10 <input type="checkbox"/> \$20 <input type="checkbox"/> \$25 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 | | |
| <input type="checkbox"/> \$200 <input type="checkbox"/> \$250 <input type="checkbox"/> \$500 <input type="checkbox"/> \$1000 <input type="checkbox"/> Other: _____ | | |

I give my permission to PAT-PAC to list my name and contribution in PATS publications: **Y** **N**

- * I confirm that the following statements are true and accurate:**
- Yes, I understand that my contribution to the Pennsylvania Athletic Trainers' Political Action Committee (PATPAC) is strictly voluntary and that I have a right to refuse to contribute without reprisal.
 - I understand that PATPAC funds will be used for political purposes and contributions will be made to candidates for state office. My payment is not payment of dues for membership in the Pennsylvania Athletic Trainers' Society (PATS).
 - I understand that my contribution is not tax-deductible as a charitable contribution for tax purposes.
 - I understand that only PATS members and their family members may contribute to the PATPAC and I certify that I am legally eligible to contribute to the PATPAC, and that I am a U.S. Citizen and am not a federal contractor.
 - I understand that Pennsylvania State Law requires the PATPAC to use its best efforts to collect and report the name, mailing address, occupation and the name of employer of individuals who contribute to the PATPAC.
 - I certify that this contribution is from my personal account and not a corporate account.

Signature: _____ Date: _____

*Please make checks payable to **Pennsylvania Athletic Trainers' Political Action Committee OR PAT-PAC** and mail to
Aaron Hand, MS, LAT, ATC, Treasurer of the Pennsylvania Athletic Trainers Political Action Committee,
133 North River Street, Wilkes-Barre, PA 18711.
Questions? Contact Aaron at 570-208-5900 x 5391 or patpac@gopats.org*

**Pennsylvania Athletic Trainers' Political Action
Committee Receipt**

Name: _____ Date: _____ Donation Amount: _____