Walkway Over the Hudson Adopt-A-Light Inscription Form

Thank you for adopting a solar light at the Walkway! Use this form to choose a number and determine an inscription. Please return this form to the address indicated at the bottom. This form can also be completed online at www.walkway.org/adopt.

Your Name: ______ Date: _____

	lousehold Name: Ex: Taylor and Sam Green, or Green Family)																					
(EX:	ayıo	rano	Sam	Gree	en, o	r Gre	en F	armiy)													
Address:																						
City:							State: Zip:															
Emai	l:										Pho	ne: _										
Light # requested:									Please let us know what inspired you to adopt-a-light:													
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