



# 11th Annual Run For Your Life Donations

**Our passion at the Iowa Heart Center Foundation is promoting cardiovascular health in Iowa. Heart disease affects everyone.** It is the rare lowan who goes without being affected by heart disease. It touches nearly all our lives. With your help, the Iowa Heart Center Foundation focuses on promoting cardiovascular health by increasing awareness and providing funding for Automatic External Defibrillator (AED) placement and training in Iowa communities.

Here's how you can help:

- \$20 purchases signage for the placement of one AED
- \$50 purchases adult electrode pads for an AED (replaced every 2 years)
- \$75 purchases a wall mount sleeve for an AED
- \$100 purchases pediatric electrode pads for an AED (replaced every 2 years)
- \$250 purchases an alarmed wall-mount box for an AED
- \$400 purchases a lithium battery for an AED (must be replaced every 4 years)
- \$1600 supports placement of an AED including the AED, adult and pediatric electrode pads, signage and alarmed wall mount box

If you would like to assist the Foundation in furthering cardiac health awareness and the placement of AEDs in Iowa communities please make a donation or you may support the Foundation by collecting tax-deductible donations from friends and family.

Please make checks payable to the Iowa Heart Center Foundation and mail or deliver to:

“Run For Your Life”  
Iowa Heart Center Foundation  
5880 University Ave., Suite 101  
West Des Moines, IA 50266

Donations should be received by 8:00 am August 25, 2018. Donors or individuals collecting donations of \$100 or more will receive a “Run For Your Life” medal. Donors or individuals collecting donations of \$250 or more will be entered into a drawing at the event.



# 11th Annual Run For Your Life Donation Form

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_

I, the undersigned, agree to indemnify and hold harmless the Iowa Heart Center Foundation (IHCF) from all cost, expense and liability arising out of my participation in this event to benefit the IHCF. I hereby give permission to the IHCF and their respective designees to take, use, reproduce and publish any and all photographs which may be taken of me before, during or immediately after this event without compensation to me. I understand and agree that all such photographs will be the sole and complete property of the IHCF.

Signature (parent or legal guardian if under 18): \_\_\_\_\_ Date: \_\_\_\_\_

Donor Name	Donor Address	Donor Email	Donor Phone #	Check Number	Donation Amount
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Please convert all cash to a check if possible.

Please make all checks payable to:

**Iowa Heart Center Foundation**

For more information or questions:

[www.iowaheartfoundation.org](http://www.iowaheartfoundation.org)

(515) 633-3555

Total Enclosed: \$ \_\_\_\_\_

**Donate or collect at least \$100 to receive a "Run For Your Life" Medal!  
 Donate or collect at least \$250 to be entered into a drawing at the event.**