



Remembering Our Loved Ones

The ALS Association Oregon and SW Washington Chapter has created a meaningful way to remember the remarkable people we provided care and support for during their time living with ALS. As a surviving family member, you can choose to include your loved one into this meaningful opportunity. Please submit this form and a print-quality photograph. These pictures are respectfully displayed on banners that are shared at our events such as the Walk to Defeat ALS®. **Thank you for sharing in this effort.**

Please fill out below and either email your high-resolution photo (min. of 1 MB; 300 dpi resolution) and form to: **careservices@alsoregon.org** - OR - mail your photo and form to:

The ALS Association Oregon and SW Washington Chapter
 Attention: Care Services
 825 NE Multnomah St, Suite 940,
 Portland, OR 97232

(If you wish to have your photo returned, please include a self-addressed stamped envelope.)

Please fill out the following information as you would like it seen in print:

(Person with ALS) PALS' Name: _____

PALS' Date of Birth (MM/DD/YY): _____ Diagnosis Date (YYYY): _____

Date of Passing (MM/DD/YY): _____ City & State (upon passing): _____

Person filling out this form:

Contact Name: _____

Address: _____

City, State, Zip: _____ Email: _____

Phone: _____ Relationship to PALS: _____

Please check which events you, family, and friends will most likely to attend so we can include your loved one on that banner:

- Portland Walk
 Vancouver, WA Walk
 Salem Walk
 Eugene Walk
 Medford Walk
 Bend Walk
 Ski (Mt. Hood Meadows)
 Ride (Mt. Angel)

By my own personal authority/power of attorney, I give permission to use this photograph and information of submitted to The ALS Association Oregon and SW Washington Chapter to be printed in their Remembering Our Loved Ones Campaign.

Signature _____