



**A Cause for Today...
A Cure for Tomorrow.**

Event Registration

Organizer Name _____

Mailing Address _____

Phone Number _____ Email _____

Event Date _____ Event Time _____

Event Location _____

Description of Fundraiser _____

Expected Funds to be Raised _____ Estimated Cost of Fundraiser _____

Do you have a connection to cardiomyopathy? _____

To be listed on CCF's community event section, please complete this registration form and email us at info@childrenscardiomyopathy.org. A CCF team member will follow up with a call to assist you with your planning.

Children's Cardiomyopathy Foundation
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