

Hollywood Police Athletic League

Yes, I Want to Help!

Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____

_____ Please contact me about being a volunteer.

_____ I would like to donate materials to the P.A.L. Program

_____ Enclosed is my check for _____ as my investment in
the future of our children.

Please mail to:
Police Athletic League of Hollywood C/O
Hollywood Police Department
Youth Services Division
3250 Hollywood Blvd.
Hollywood, FL 33021
(954) 967-4430