



## Mail-In Donation Form

DONATION INFORMATION: Please PRINT clearly and fill out completely.

Donation Amount:

\_\_ \$100 \_\_ \$250 \_\_ \$500 \_\_ \$750 \_\_ \$1,000 \_\_ Other Amount: \$\_\_\_\_\_

☐ One-Time Gift ☐ Monthly gift

First Name\*: \_\_\_\_\_ Last Name\*: \_\_\_\_\_

Address\*: \_\_\_\_\_ Apt: \_\_\_\_\_

City\*: \_\_\_\_\_ State\*: \_\_\_\_\_ Zip\*: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

PAYMENT INFORMATION:

☐ I have enclosed a check payable to Covenant House ☐ My credit card information is below

Please circle one:    MasterCard    Visa    American Express    Discover

Credit Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Tribute Information:

This gift is in ☐ honor, ☐ memory of, ☐ In lieu of a Christmas/Holiday gift

Please send acknowledgment to:

Name: \_\_\_\_\_

Address\*: \_\_\_\_\_ Apt: \_\_\_\_\_

City\*: \_\_\_\_\_ State\*: \_\_\_\_\_ Zip\*: \_\_\_\_\_ Country: \_\_\_\_\_

Email: \_\_\_\_\_

Please mail your gift with this completed form to:

StandUp for Kids National

200 Nelson Ferry Rd. Suite b

Decatur, GA 30030

This form is for your convenience; you can simply use the memo on your check if you prefer.