



In This Together...  
Learn. Share. Laugh.

Please use this form to fax or mail gifts.

**Gilda's Club Grand Rapids**

1806 Bridge Street NW  
Grand Rapids, MI 49504  
Phone (616) 453-8300  
Fax (616) 453-8355

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_

- Yes, I/We will support Gilda's Club Grand Rapids! Enclosed is my/our gift of:  
\$25 \$50 \$100 \$250 \$other \_\_\_\_\_
- Please list my name as above       Keep my gift anonymous
- I/We pledge a total of \$ \_\_\_\_\_ to be paid over \_\_\_\_\_ years on a  
monthly / quarterly / annual basis starting \_\_\_\_\_.
- I/we would like to make a planned gift to Gilda's Club Grand Rapids. Please contact me.
- I have other thoughts to share. Please contact me.

**Payment Options:** *Your gift is tax-deductible to the extent provided by law.*

- Please charge my credit card (Visa, MasterCard, Discover or American Express)  
Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_  
Name \_\_\_\_\_ Signature \_\_\_\_\_
- My check is enclosed. Make payable to Gilda's Club Grand Rapids.

**Designation Options:**

If appropriate, please tell a little bit about your gift and why you chose Gilda's Club.

My Gift is:

*In Memory of* \_\_\_\_\_ *In Honor of* \_\_\_\_\_

- Please send an acknowledgement letter to the following family member/friend:  
Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_
- My company will match my gift. Please contact me for details.
- Please send me information about ways to volunteer for Gilda's Club Grand Rapids.

For more information, please call us at (616) 453-8300 or e-mail us at [kmorrison@gildasclubgr.org](mailto:kmorrison@gildasclubgr.org)

**Thank you so much for considering Gilda's Club for your donation!**