St. Baldrick's Foundation®

Conquer Kids' Cancer

2012 DONATION FORM

Want your donation posted to the website faster?
Give by credit card online at StBaldricks.org or
by phone at 888.899.BALD (2253)
Toll Free in U.S. Only

n/a	n/a	2012	n/a	Cleveland Heights Community Center
Shavee/Participant Name	ID#	Event Year	Team n/a	Venue E-7849

Step 1: Donor Information

This gift is from a Business or Organization/Foundation **OR** **This gift is from an Individual**

Name of Business or Organization/Foundation

Contact Name

Job Title

Prefix *First Name* *MI* *Last Name*

Recognition Name (to display on website)

Step 2: Email Address

Email Address _____

Go green! Providing your email address lowers our costs and benefits the environment.

We do not sell, rent, exchange or otherwise share your information with any other organization or individual.

Step 3: Optional Gift Information

❑ Please make this gift **ANONYMOUS**
(Only the participant will see your name.)

Please make this gift...

❑ in memory of
❑ in honor of _____
Name

Step 4: Mailing Address

❑ Home ❑ Work

Address

City *State* *Zip* *Phone:* ❑ *Home* ❑ *Work* ❑ *Mobile*

Step 5: Donation

Donation amount: ❑ **$1,000** ❑ **$500** ❑ **$250** ❑ **$100** ❑ **$50** ❑ **Other $** _____

❑ **Check**

Make checks payable to: St. Baldrick's Foundation

Please write the participant ID in the memo line of your check.

❑ **Cash**

Never put cash in the mail.

Turn in your cash donation to the participant or at the event.

Double your donation

Apply to your company for a matching gift. Check with your Human Resources Department or email MatchingGifts@StBaldricks.org

Donations are fully tax deductible to the extent allowed by law.
IRS nonprofit ID # is 20-1173824.

Thank You!

Please return this completed form with your donation to your participant, or send to:

St. Baldrick's Foundation, 1333 S. Mayflower Avenue, Suite 400, Monrovia, CA 91016