

DONATION FORM

Women Swimmin' and Go the Distance for Hospicare

Please fill out this form completely and legibly. Donations are tax deductible to the fullest extent allowed by the law.

Please send the form below with your donation and information to:

Women Swimmin' Donations
Hospicare and Palliative Care Services
172 East King Road
Ithaca, NY 14850

For more information or questions, call 607-272-0212 or email womenswimmin@hospicare.org

Gifts can also be made online at www.womenswimmin.org

Thank you for your support!

✂-----

Please accept my donation of: (circle one)

\$500 \$250 \$100 \$50 \$25 Other (please specify): _____

Name of swimmer/paddler/Go the Distancer/team you are sponsoring: _____

Your name: _____

(If paying by credit card, please print your name exactly as it appears on your credit card)

Mailing address: _____

Telephone #: _____ Email: _____

Payment options:

Check (*Please make checks payable to "Hospicare" and write name of the fundraiser or team on memo line*)

Credit card: (**circle one**) VISA/Mastercard # _____ CVV# _____

Exp. date: _____ / _____ Signature: _____

Please know we deeply appreciate your support!