



GENERAL DONATION FORM

Full Name: _____ Amount of Donation: _____

Company/Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

I WILL PAY WITH A CREDIT CARD

Card #: _____ Exp. Date: _____ Visa MC DISC AMEX

Name as it appears on card (*please print*): _____

Billing Same as above _____

Address: _____

City: _____ State: _____ Zip: _____

Your signature: _____ Date: _____

I WILL PAY WITH A CHECK (*please ensure checks are payable to Tee It Up for the Troops*)

I WISH TO HAVE THIS GIFT REMAIN ANONYMOUS

OPTIONAL DEDICATION

I would like my gift to be: *In Honor of...* *In Memory of...*

Honoree: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Thank you for supporting our mission through your generous contribution!