



MEMORIAL & HONORARIUM GIFTS

Please print form,
fill in information,
and mail or fax to Tip of the Mitt
Watershed Council.

Gift in Honor of:

Donor's Name: _____

Mailing Address: _____

_____ Zip _____

Phone: () _____ email: _____

Gift in Memory of: _____

Donor's Name: _____

Mailing Address: _____

_____ Zip _____

Phone () _____ email _____

Family to be Notified of Gift

Name: _____

Mailing Address: _____

_____ Zip _____

Name: _____

Mailing Address: _____

_____ Zip _____

Payment Information:

Date Received: _____

Amount \$ _____ Check# _____

Cash

Credit Card _ American Express _ Discover _ VISA _ Master Card

Card No. _____ Exp. _____ Authorization No. _____

GL = Membership Endowment Other: _____

Notes: _____

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www.watershedcouncil.org