

# Donation Gift Information Form

(Please Print)

## Gift Sender's Information

Your Name \_\_\_\_\_

Your Email Address \_\_\_\_\_

Additional 'From' Names \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Gift Recipient(s) Information

Gift Letter Method of Delivery

Email (include email address) \_\_\_\_\_

Printed and Mailed (include street address - allow two weeks for delivery)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Occasion and Delivery Date \_\_\_\_\_

Name and Relationship of Recipient(s)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Complete and mail this form along with donation check to:

War Dog Memorial

P.O. Box 25822

Colorado Springs, CO 80936