



## Donation Gift Form – Mail In

Phone: 704-821-0110  
Email: info@btfnc.org  
Address: P.O. Box 5627  
Charlotte, North Carolina 28299

**I would like to donate the following amount: \$** \_\_\_\_\_

**Circle one:** Monthly    Single

### Donating by Check:

Please mail your check and this form to the address above.

### If donating by Credit Card, please provide us with the following information:

Circle your type of Credit Card:

VISA    Master Card    American Express    Discover

Credit Card Number \_\_\_\_\_

Exp Date: \_\_\_\_\_

Name on the Card: \_\_\_\_\_

### Please provide the following information in full:

Circle Your Preferred Title: Ms    Mrs    Mr    Dr    None    other \_\_\_\_\_

First Name: \_\_\_\_\_

Last Name \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Country \_\_\_\_\_ Email \_\_\_\_\_  I do not want to receive  
email updates

Daytime Phone: \_\_\_\_\_

Evening Phone \_\_\_\_\_