Greenwood
WILDLIFE REHABILITATION CENTER

Donation Form

Remember that you may be able to double or even triple the donation Greenwood receives through your company's matching gift program. Please check with your employer's human resource department to determine if your gift is eligible.

Amount
☐ $50 ☐ $100 ☐ $250 ☐ $500 ☐ $1,000 ☐ $Other: _____

Name
First MI Last Title (Dr., Mrs., Mr., Ms.)
_____

Address
Street Address
_____
City State Zip
_____
Phone number Alternate phone number
_____
(Phone number will not be used for solicitation purposes.)

Payment Information
☐ Credit Card type (Visa/Mastercard/AmEx): _____
Number:_____ Expiration (MM/YY):_____
Signature:_____

☐ Check *(Make check payable to Greenwood Wildlife Rehabilitation Center)*

To make a donation, complete this form, print, and fax, email, or mail to:
Greenwood Wildlife Rehabilitation Center
PO Box 18987
Boulder CO 80308
Email: director@greenwoodwildlife.org
Phone: 303-823-8455
Fax: 303-823-5051

Is this gift in honor or memory of someone else? ☐ In honor of ☐ In memory of

Name and address of the friend/family member whom Greenwood should notify of your gift:
_____
_____