

Donation Form



Amount enclosed:

\$1,000	<input type="checkbox"/>
\$500	<input type="checkbox"/>
\$250	<input type="checkbox"/>
\$100	<input type="checkbox"/>
\$50	<input type="checkbox"/>
\$25	<input type="checkbox"/>
Other: \$	<input type="checkbox"/>

Please list the name(s) by which we can recognize your contribution:

Name(s): _____

Address: _____

City/State/ZIP: _____

Phone: _____

E-mail: _____

Payment Method (check one):

MasterCard	<input type="checkbox"/>
Visa	<input type="checkbox"/>
Discover	<input type="checkbox"/>
American Express	<input type="checkbox"/>
Check #	<input type="checkbox"/>

Account #: _____

Expires: _____

Cardholder: _____

Cardholder

Signature: _____

_____ This gift is in memory/honor (circle one) of:

Name(s): _____

Address: _____

City/State/ZIP: _____

Please return completed form along with your contribution (make checks payable to the Wilds) to:

The Wilds
Resource Development Office
14000 International Rd
Cumberland, OH 43732

Phone: 740-638-5030 - Fax: 740-638-2287 - Web: www.thewilds.org