



## DONATION FORM

**Yes, I would like to help individuals and families in need!**

Please print and complete this form when mailing your gift.

**Enclosed is my tax-deductible gift of:**

\_\_\_\$1,000 \_\_\_\$500 \_\_\_ \$300 \_\_\_ \$100 \_\_\_\$50 \_\_\_\$35 \_\_\_ Another Amount: \$\_\_\_\_\_

*Please make checks payable to: Beverly Bootstraps*

**Name** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Phone Number** \_\_\_\_\_

**Address** \_\_\_\_\_

**City, State, Zip** \_\_\_\_\_

**Comments:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Would you like your name listed in any future publications that may recognize donors?**

Yes \_\_\_ No \_\_\_

If yes, how would you like your name to appear? \_\_\_\_\_

**Mail the completed form and donation to:**

**Beverly Bootstraps**  
35 Park Street  
Beverly, MA 01915  
TEL: (978) 927-1561

*Your gift, in any amount, is appreciated!*