



DONATION FORM

Thank you for your support



We rely on the generosity of donors like you to continue providing safe shelter and care for the abandoned, abused and lost animals who arrive at MCPAWS. Your donation is tax-deductible to the full extent of the law.



Gift Information

Donation Amount: \$25 \$50 \$100 \$250

Other: \$ _____

Recurring: One-Time Annually Monthly

Tribute Information

Recognize birthdays, anniversaries, or any reason to celebrate. Or express your sympathy for the loss of a loved one with a gift in any amount you choose.

Tribute Type: In Memory of
 In Honor of

Please send a letter notifying the following individual(s) of my gift.

Notification Name: _____
 Notification Address: _____
 Notification City: _____
 Notification State, Zip: _____
 Notification Message: _____

Contact Information

Title: _____
 First Name: _____
 Last Name: _____
 Address: _____
 City: _____
 State: _____
 Postal Code: _____
 Country: _____
 Email: _____
 Yes, I would like to receive communications from MCPAWS
 Phone: _____

Payment Information:

Total Amount: \$ _____

Payment Type: Check (made payable to MCPAWS Regional Animal Shelter)
 Credit Card (please complete information below)

Card Type: Visa
 MasterCard
 Discover
 American Express

Card Number: _____
 CVV2: _____
 Expiration Month: _____
 Expiration Year: _____

Please print this form, complete, and return to:

MCPAWS Regional Animal Shelter
 PO Box 1375 | McCall, ID 83638