



OLD BONEY MOUNTAIN FOUNDATION FOR KIDS

\$

Donation Amount

Please check one:

MONTHLY DONATION

ONE-TIME DONATION

MULTI-YEAR DONATION for _____ years

Making your donation online saves time and expense, allowing us to do more with every dollar. Please consider donating online.

Full Name(s): _____

Company/Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Email: _____

I WILL PAY WITH A CREDIT CARD.

Card #: _____ Exp. Date: _____ Visa MC Disc AmEx

CVC#: _____ Name as it appears on card (please print): _____

Billing Address: same as shipping _____

City: _____ State: _____ Zip: _____

Your signature: _____ Date: _____

I WILL PAY WITH A CHECK. (please ensure checks are payable to Old Boney Mountain Foundation for Kids)

OPTIONAL INFORMATION

- Yes! I wish to have this gift remain anonymous.
- Yes! Subscribe me to your electronic newsletter.
- Yes! Send me an electronic note on my birthday. Day: _____ Month: _____ Year: _____
- Yes! I would like information about including the Old Boney Mountain Foundation for Kids in my estate plans.

Thank you for supporting us through your generous contribution.

Federal Taxpayer I.D. #83-3598703

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