

## **Honor/Memorial Donation Form**

☐ Yes. I would like to n	nake a <b>donatio</b> n	n in honor or in m	emory	of a person, place, occasion, etc
1. Gift Amount:		Pensacola camp	us 🗌	Mobile campus
<b>2.</b> Type of payment:	Visa	MasterCard		Cash or Check
NAME (as it appears on car	d, if applicable)			
ADDRESS				
ACCOUNT #	. <u> </u>		_	EXPIRES
SIGNATURE				DATE
OR				
<b>4.</b> Please notify the follow	ving of my gift	:		
NAME				
ADDRESS				
CITY:	ST	ATEZIP CODI	E	
5. Please print this form as Waterfront Rescue Mis P.O. Box 870 Pensacola, FL 32591		ration Office		
Waterfront Ro	escue Mission,	Inc. · 1-888-853-86	655 · <u>w</u>	www.waterfrontmission.org
For Waterfront Rescue M	ission Use Only	,	<b>-</b> -	<del></del> _
Date received		Processed by		