



## South Haven Community Foundation Donation Form

I am interested in helping improve the quality of life in the greater South Haven area.

**Enclosed is my gift of \$\_\_\_\_\_** ( ) Please list my donation as "*Anonymous*"

**Please direct my contribution to the following fund(s):**

- ( ) South Haven Community Foundation Endowment Fund
- ( ) South Haven Community Foundation Youth Endowment Fund
- ( ) Blessings in a Backpack Endowment Fund
- ( ) Friends of Pilgrim Haven Nature Area Endowment Fund
- ( ) Friends of South Haven Skate Park Endowment Fund
- ( ) Liberty Hyde Bailey Museum Endowment Fund
- ( ) Maritime Museum Endowment Fund
- ( ) SHARA/SHARP Park Endowment Fund
- ( ) Stanley Johnston Memorial Park Endowment Fund
- ( ) South Haven Memorial Scholarship Endowment Fund
- ( ) South Haven Public School Endowment Fund
- ( ) We Care I.N.C. Endowment Fund

Name (please print): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

( ) **Matching Gift Program:** If your employer/former employer has a matching gift program for current or retired employees, please contact your Human Resources Department for matching gift forms or provide the information below and we will take care of the rest.

Employer Name: \_\_\_\_\_

HR contact or website: \_\_\_\_\_

Gift in honor/memory of: \_\_\_\_\_

Please notify the following individual(s) of this gift:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Method of Giving:

( ) Visa ( ) Mastercard ( ) American Express ( ) Check

Credit Card #: \_\_\_\_\_

Exp Date: (MM/YY) \_\_\_\_\_ / \_\_\_\_\_ CVV \_\_\_\_\_

Signature: \_\_\_\_\_

Checks Payable to:  
South Haven Community Foundation  
PO Box 507  
South Haven, MI 49090

Thank you for your generous gift. Kindly return this form to the above address.