



MAIL-IN DONATION FORM

Thank you for consideration a donation to Special Olympics Connecticut. Your gift is a meaningful way to make a positive impact in the lives of people with intellectual disabilities.

GIFT INFORMATION

Donation Amount (US\$): \$1,000 \$500 \$250 \$100 \$50 Other \$ _____





Name _____ (OPTIONAL) Business Name _____

Address _____ City _____ State _____ ZIP Code _____

Country _____ Email Address _____ @ _____

(OPTIONAL) Please provide your phone number so we can reach you, if necessary, with questions regarding your donation.
Phone Number _____ - _____ - _____

My donation is enclosed. (Please make checks payable to Special Olympics Connecticut)

Please charge my:     **in the amount of \$** _____

Credit Card Number _____ CSC Code _____ Expiration Date _____

Name on Card _____ Signature _____

HONOR OR MEMORIAL GIFT INFORMATION (OPTIONAL)

This gift is: **in honor of** **in memory of** _____

Please complete the following if you would like an acknowledgement card sent to the honoree or family:

Recipient Name _____

Address _____ City _____ State _____ ZIP Code _____

TELL US ABOUT YOURSELF (OPTIONAL)

Please check all that apply to you

I have coached for Special Olympics.
 I have volunteered for Special Olympics.
 Please send me a free guide to help organize my estate plan.

Special Olympics is exempt under Section 501(c)(3) of the IRS and this gift is tax deductible.

QUESTIONS?

Contact: Kristen Mengold
Office: (203)230-1201 ext. 280
E-mail: kristenm@soct.org

MAIL TO:

Attn: Kristen Mengold
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 Hamden, CT 06517-2232