



# Mail in Donation Form

Date: \_\_\_\_\_

## DONOR INFORMATION

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

Organization: \_\_\_\_\_

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

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

E-Mail Address: \_\_\_\_\_

Get interesting news, updates, and information about community events delivered directly to your inbox.  
We won't bombard you with emails, and we don't share your email.

Phone – Home: \_\_\_\_\_ Cell: \_\_\_\_\_

### PAYMENT OPTIONS

One Time Gift Amount: \_\_\_\_\_

- I'm enclosing my check made payable to **The Peace Center**.
- Please charge my credit/debit card:
- Visa    Mastercard    American Express    Discover

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

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date: \_\_\_\_\_

### OR BECOME A SUSTAINING DONOR!

Your monthly gift will make a significant difference.

- YES! Please bill my credit/debit card in the amount of \$ \_\_\_\_\_ per month.
- YES! I would like to make a monthly gift in the amount of \$ \_\_\_\_\_ using my checking account. I have attached a voided check from the account I would like to use.

Your monthly donation will be made each month from the payment option you select. You may cancel or change the amount at any time by calling 215-750-7220 x 1105.

I am also interested in becoming involved in the following areas:

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Please mail completed form to:  
The Peace Center | 102 W Maple Ave | Langhorne, PA 19047-2820