RTRFAC

ROCKING THE ROAD FOR A CURE

IN HONOR/IN MEMORY GIFT FORM

ON BEHALF OF RTRFAC AND ITS BOARD MEMBERS:

Thank you for your In Honor/Memory Of donation. We appreciate your support.

All donations go towards providing free wellness and support services to cancer patients.

Your card will be sent to the recipient within a week of us receiving this email.

☐ **IN MEMORY OF** ☐ **IN HONOR OF**

Name of Honoree/Person in Memoriam: _____

☐ **I would like an honor card without the gift amount mailed to:**

☐ **would like an honor card with the gift amount mailed to:**

NAME: _____

MAILING ADDRESS: _____

How would you like the notify card to be signed: _____

☐ MONETARY DONATION

PAYPAL $ _____

To **make a donation with credit card or PayPal**, go to:

rockingtheroadforacure.org/in-honor-of-donation/
rockingtheroadforacure.org/**memorial-donation/**

Check $ Amount: _____

Check **Number:** _____

Make Checks Payable to:
Rocking The Road For A Cure, Inc.

Mail Checks To:
P.O. Box 404 Little Neck, NY 11363

CONTACT INFORMATION

COMPANY NAME **(if applicable)**

FIRST NAME | LAST NAME

STREET ADDRESS

CITY | STATE | ZIP CODE

CELL PHONE NUMBER | **HOME PHONE NUMBER** | **EMAIL**

☐ **I am interested in receiving information about Rocking The Road For A Cure via email**

TAX EXEMPT #249855

A Nonprofit 501(c)(3) Organization for Breast Cancer Wellness Programs and Support Services

RTRFAC
P.O. Box 404
Little Neck, NY 11363
(516) 417-1911