



100 Reserve Road, Suite E200
Danbury CT 06810
800-728-5653 ext. 2

Mail in Tribute Gift Form

I am enclosing a Memorial /Tribute Gift in the amount of: \$ _____

- ☐ **In Memory**
☐ **In Honor**
☐ **In Celebration**

I Wish to Honor:

Name: _____

Address (if applicable): _____

City: _____ State: _____ ZIP: _____

☐ **Please check here if you do not want us to acknowledge the recipient.**

From:

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ E-Mail: _____

If donating by Check, please make check payable to *Guideposts Foundation*.

If donating by Credit Card, please provide us with the following information:

Please circle one: MasterCard Visa American Express Discover

Credit Card Number: _____

Expiration Date: _____ (MM/YY) Security Code: _____

Signature: _____

*Contributions to Guideposts Foundation are tax-deductible to the extent allowed by law.
Thank you for your support!*