## north shore senior center

## Tribute Gift Donation Form

Arthur C. Nielsen, Jr. Campus 161 Northfield Road Northfield, IL 60093 Dept. of Development: 847.784.6020 nssc.org

Tribute gifts are a meaningful way to support North Shore Senior Center's services and programs while honoring or memorializing someone special in your life. An acknowledgment will be sent to you and a tribute card will be mailed to the honoree or, in the case of a gift in memory of, to the designated family member(s), in approximately two weeks of receipt of your donation.

Please complete the below information. If more space is needed, please use the back of the form.

| Tribute is being ma  | de by: (Please print) |                                 |              |                      |        |
|----------------------|-----------------------|---------------------------------|--------------|----------------------|--------|
| Name                 |                       |                                 |              |                      |        |
| Address              |                       | Email Address                   |              |                      |        |
| City                 |                       | State                           | Zip Code     | e Contact Phone No   |        |
| Gift amount: □ \$    | 66 🗆 \$125            | □ \$250 [                       | □ \$500      | ☐ Other:             |        |
| Gift designation:    | ☐ General Opera       | ting $\square$ House of         | Welcome      | ☐ Senior & Family Se | rvices |
| This gift is given:  | $\square$ in Honor of | Honor of $\square$ in Memory of |              |                      |        |
| Name                 |                       |                                 |              |                      |        |
| Send tribute card to | o: (Please print)     |                                 |              |                      |        |
| Name                 |                       |                                 |              |                      |        |
| Address              |                       | Email Address                   |              |                      |        |
| City                 |                       | State                           | Zip Code     | e Contact Phone No   | ).     |
| ☐ Enclosed is my     | check made payable    | to North Shore Sei              | nior Center. |                      |        |
| ☐ I authorize Nort   | h Shore Senior Cente  | er to charge my: [              | □ Visa       | ☐ MasterCard         |        |
| Name on Card         |                       |                                 |              | Expiration Date      |        |
| Card Number          |                       |                                 |              | 3 Digit Security Co  | ode    |
|                      |                       |                                 |              |                      |        |

Cardholder's Signature

Please mail this form with your method of payment to: Attn: Development Department/Tribute Gift, North Shore Senior Center, 161 Northfield Road, Northfield, IL 60093

North Shore Senior Center is a 501(c)(3) organization. Your gift is tax-deductible to the fullest extent allowed by law.