

## DONOR INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Organization/Company Name: \_\_\_\_\_

Address 1 : \_\_\_\_\_

Address 2 : \_\_\_\_\_

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

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

## PAYMENT INFORMATION

Circle One:     Credit Card #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

Donation Type:  Individual  Company or  Group Donation

Cardholder Name: \_\_\_\_\_ Donation Amount: \$ \_\_\_\_\_.

CC Billing Address: \_\_\_\_\_

Signature: \_\_\_\_\_

Check Number: \_\_\_\_\_

Make Checks Payable to **Tango Charities**

## HONOR/MEMORY (PLEASE SEND ACKNOWLEDGEMENT CARD TO):

Honor (Living Person)  Memorial (Deceased Person)

Of: \_\_\_\_\_

No Card Requested

Organization/company name: \_\_\_\_\_

Address 1 : \_\_\_\_\_

Address 2 : \_\_\_\_\_

City: \_\_\_\_\_ state: \_\_\_\_\_ Zip: \_\_\_\_\_

Message to Recipient: \_\_\_\_\_

**Request to add my name/address to:  Mailing List  TFT Email or  Both**