## **MAIL - IN DONATION**

## Fill out this form and return to:

Special Olympics TN – Area 3

Attn: Donations P.O. Box 4594

Johnson City, TN 37602



Special Olympics is exempt under Section 501(c)(3) of the Internal Revenue Code and this gift is tax deductible.

## DONOR INFORMATION Name(s): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_ Email Address (optional): \_\_\_\_\_ Contact number (optional): Would you like this donation to be made in honor or in memory of someone? If so, check this box. You will be asked for the honoree's name in another section. HONOR OR MEMORIAL DONATION (OPTIONAL) This donation is made: $\Box$ In Honor of ☐ In Memory of Name(s): And will be acknowledged to: Name(s): Address: City: Zip Code: Email Address (optional): **Your Personal Message: DONATION INFORMATION** ☐ My donation is enclosed. (Please make checks payable to Special

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For more information or questions, leave a message for Tyra Rowland at (888) 915-7227

