



Please mail this form and your check or
Credit Card Information to:

California Scottish Rite Foundation
855 Elm Ave.
Long Beach, CA 90813

Date:

(Please PRINT *all information clearly*)

Enclosed is my check in the amount of \$_____ payable to the California Scottish Rite Foundation

My name: _____

Address: _____ Home phone: (_____) _____

City/State/ZIP: _____

E-mail _____

(Receipt will be sent to the address above.)

TYPE OF DONATION (please choose one):

___ **Foundation General Fund** ___ **Foundation Scholarships** ___ **Foundation Childhood Language Centers**

Please Select the Scholarship _____ or Language Center _____

Is this a commemorative Donation? ___ No ___ Yes (Please supply us the name of the person)

___ **Gift in memory of:** _____

(name of deceased)

___ **Gift in honor of:** _____

(name of individual)

Send acknowledgement card to:

Name: _____

Address: _____

City/State/ZIP: _____

___ **I prefer to make my donation by Credit Card** (Please enter the information below)

___ American Express ___ Discover ___ Master Card ___ Visa

Credit Card Number _____ Exp. Date _____

Signature _____

The California Scottish Rite Foundation thanks you for your continued support!
Your contribution is tax-deductible.