



Donation Form

Whether you are a long time March of Dimes supporter or are giving for the first time, thank you for your commitment to saving babies.

Mail or fax your completed form along with your donation to:

March of Dimes
Attn: DRFR
1275 Mamaroneck Avenue
White Plains, New York 10605
Fax: 914-997-4537 (Credit Card only)

Donor Information

First Name _____ Last Name _____

Address _____

City _____ State _____

Zip Code _____ Country _____

Phone _____ E-Mail _____

Donation

My check is enclosed Please charge my credit card

Donation Amount \$ _____ (in US currency)

Card Type  

Card Number _____ Expiration _____

Name of Cardholder _____ Signature _____

Billing Address: (if different than above)

Address _____

City _____ State _____

Zip Code _____ Country _____



Donation in Memory / in Honor

This gift is:

In Memory

Remember someone special by giving a gift in their memory. March of Dimes will send a card acknowledging your thoughtful donation to the person of your choice.

In Honor

Give a gift to honor someone close to you for a birthday, an anniversary, a wedding, to celebrate a birth of baby, or other special occasion. March of Dimes will send a card acknowledging your thoughtful donation to the person of your choice.

WHO IS THIS DONATION IN MEMORY/HONOR OF:

Name _____

Occasion (in honor donations) _____

PLEASE SEND AN ACKNOWLEDGEMENT OF MY DONATION TO:

First Name _____ Last Name _____

Address _____

City _____ State _____

Zip Code _____ Country _____