



Donation Form

Please print this form to mail with your gift to Greater Hickory Cooperative Christian Ministry

I would like to give to: (please check one choice)

Where the Need is Greatest Crisis Intervention Health Care Endowment

In Honor of _____ Notification Name/Address _____

(Honorary letter will be mailed to this address on your behalf) _____

In Memory of _____ Notification Name/Address _____

(Memorial letter will be mailed to this address on your behalf) _____

Donor Contact Information:

Name _____

Street Address _____

City _____ State _____ Zip Code _____

Phone Number _____ E-mail Address _____

(A letter will be mailed to this address in acknowledgment of your gift)

Donation Amount* \$ _____

I prefer to make my donation by:

_____ Check or Money Order *made out to "GHCCM"*

_____ Credit Card (please enter information below)

_____ Visa _____ MasterCard _____ American Express

Credit Card Number _____ Exp. Date _____

Signature _____

Please mail this form along with your gift to: GHCCM
31 First Avenue SE
Hickory, NC 28602

Thank you for your contribution!