

## NCEFT DONATION FORM

**Enclosed is my gift of:**

- ☐ \$25
- ☐ \$50
- ☐ \$100
- ☐ \$250
- ☐ \$500
- ☐ \$1,000
- ☐ \$2,500
- ☐ Other \_\_\_\_\_

**Please direct my gift to:**

- ☐ General Operations to keep all NCEFT programs going strong
- ☐ Financial Assistance Fund to enable those less fortunate to receive therapy
- ☐ Veterans and First Responders Fund to provide programs free of charge to all military and first responder personnel

**NAME OR COMPANY NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

☐ **PREFERRED:** I am enclosing a check with this form (*Payable to NCEFT*). Paying by check maximizes your donation.

☐ Please charge my credit card:    ☐ Visa    ☐ MasterCard    ☐ Discover    ☐ AMEX

Amount: \$ \_\_\_\_\_ Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CVV: \_\_\_\_\_ Billing zip code: \_\_\_\_\_

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

My gift is:                      ☐ in honor of                      ☐ in memory of:

Name: \_\_\_\_\_

For my honorarium/memorial gift, please notify:

Name: \_\_\_\_\_

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

☐ My employer will match my gift.

☐ I would like information about NCEFT's Legacy Society and including NCEFT in my estate planning.

☐ I would like information about making a gift of securities.

☐ I am interested in volunteer opportunities at NCEFT.