# Donation Form

Donations by check should be made payable and mailed to: Hope for Hypothalamic Hamartomas, PO Box 941, Eagle, ID 83616. Please print and enclose the following form. HopeforHH.org tax id is **EIN: 27-1433464**

### Donation Amount:
- $10.00
- $25.00
- $50.00
- $100.00
- $250.00
- Other

If Other, enter amount: [ ]

### Donor Information:
- First Name: [ ]
- Last Name: [ ]
- Email: [ ]
- Company: [ ]
- Mailing Address: [ ]
- City/Town: [ ]
- State/Province: [ ]
- Zip/Postal Code: [ ]
- Country: [ ]

### Honoree/Memorial Information:
- Gift Type: [ ]
  - In Honor
  - In Memory
  - Other Type

Honoree / Memoriam Information:
- First Name: [ ]
- Last Name: [ ]

### Send the acknowledgement to:
- First Name: [ ]
- Last Name: [ ]
- Email: [ ]
- Mailing Address: [ ]
- City/Town: [ ]
- State/Province: [ ]
- Zip/Postal Code: [ ]
- Country: [ ]

### Matching Gifts:
Many companies offer matching gift programs to encourage their employees to contribute to a charitable organization. Most of these programs match contributions dollar for dollar, while some double or triple the amount of your gift. Please contact your employer to see if they offer a matching gift program. If so, complete the form they provide and mail it to the address above.

My Company: [ ]
- Does Match
- Does NOT Match
- Not Applicable