

A Grateful Mind International

“Providing immediate humanitarian relief to individuals and families who are experiencing a crisis; while providing them access to educational resources that will empower them to move beyond their crisis.”

Financial Donation Form

Name: _____

Address: _____

City/State/Zip _____

Phone _____ Email _____

Donation/Pledge

I am making a donation of \$ _____

I pledge a yearly contribution of \$ _____ (amount)

This pledge shall start on _____ (date)

This pledge shall be in effect to _____ (date) unless revoked by me at an earlier date.

Signature _____ Date _____

Check the box by the method of payment you would like to use:

Personal Check Credit Card: VISA MC AMEX

Credit Card # _____ Expiration Date _____ CSC _____

Signature _____ Date _____

Donations can be mailed to: A Grateful Mind International, PO Box 721915, Orlando, FL 32872-1915

Or donate electronically at www.agratefulmind.org Click “Donate”

For additional information/comments please contact us at 407-900-5558

Comments/Special Instructions _____

*Thank you for partnering with A Grateful Mind International.
Your financial support is crucial to the families in crisis. Your donation is greatly appreciated.*