



**Shriners Hospitals**  
for Children®

Thank you for ***Sending Love to the rescue®!***

Your gift to Shriners Hospitals for Children will help a child receive excellent specialty medical care and/or the transportation fund for our local patients that travel to any one of our hospitals. The donation can also commemorate a loved one, a friend, or an event. All donors and honorees (if address provided) will receive an acknowledgment letter.

Please mail completed form to:  
Hasan Shriners Hospitals for Children  
1822 Palmyra Road  
Albany, GA 31701

**Donor Information** (please print)

Mr.  Ms.  Mrs.  Mr. & Mrs.  Other: ..... Name: .....

Billing Address: .....

City: ..... State: ..... Zip Code: .....

Phone: ( ..... ) ..... Email: .....

I am a Shriner, please credit my temple: .....

Please send me information about Shriners Hospitals for Children's.

Please include me on your courtesy Fez Sez magazine mailing list.

**Gift Information**

I would like to make a gift of \$ .....

My gift is for:  Wherever it is needed most  Flowers for the Living (in lieu of flowers)  The Annual Paper Crusade 04/01-11/30

My check is enclosed. Please make check payable to Hasan Shriners Hospitals for Children.

Please charge my credit card:  Mastercard  Visa  American Express  Discover

This is a one-time gift  Please charge this amount monthly on (enter day and month): .....

Name (as it appears on card): .....

Credit card number: ..... CVV number: ..... Expiration date: .....

Authorization signature: .....

**Commemorative Gifts**

In Memory of  In Honor of: Name: .....

Send gift notification to: Name: ..... Relationship to deceased/honoree: .....

Address: .....

City: ..... State: ..... Zip Code: .....