



# Donation Form

National Brain Tumor Society  
EIN: 04-3068130

## Donate online at [www.braintumor.org](http://www.braintumor.org)

Online donations are the most efficient way to give! If you are unable to donate online, please mail or fax this completed form to: National Brain Tumor Society, 55 Chapel Street, Suite 200, Newton, MA 02458. Donations made with credit cards can also be faxed to 617.924.9998.

Please print clearly. Questions? Call 617.924.9997 or visit [www.braintumor.org](http://www.braintumor.org)

## DONOR INFORMATION

Name(s): \_\_\_\_\_

Company (if applicable): \_\_\_\_\_ Title/Position: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

(Never sold or exchanged)

- I have included National Brain Tumor Society in my estate plans.
- Please send me more info on how to include National Brain Tumor Society in my estate plans

## DONATION INFORMATION

- I/We wish to make a tax-deductible donation of \$ \_\_\_\_\_
- I/We wish to make a monthly recurring gift of \$ \_\_\_\_\_ ending on \_\_\_\_\_.

Please select an area of designation:

- Area of greatest need
- Pediatric Research Initiative
- Defeat GBM
- Oligodendroglioma Research Fund

### Tribute Information (if applicable)

- This gift is in honor of: \_\_\_\_\_
- This gift is in memory of: \_\_\_\_\_

### Please notify the following person(s) of my tribute gift:

Name(s): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Relation to honoree: \_\_\_\_\_

### Matching Gift:

Double your gift by submitting a matching gift form from your employer!

- My matching gift form is enclosed.

## PAYMENT TYPE

- Check/money order enclosed, payable to National Brain Tumor Society.
- Charge my credit card \$ \_\_\_\_\_

Circle one: Visa / Mastercard / American Express / Discover

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ / \_\_\_\_\_ CVC #: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Please print name as it appears on card

Signature of Cardholder

## PRIVACY POLICY

National Brain Tumor Society values the trust you place in us. We will not sell, trade, or share the personal information you provide to us through our website(s) or by participating in this event with anyone else, nor will we send donor mailings on behalf of another organization without your written permission to do so. To read our complete privacy policy, visit [www.braintumor.org/privacy](http://www.braintumor.org/privacy).

Please sign below to acknowledge the Privacy Policy above.

Signature

Date