

Offline Donation Form



**Special
Olympics**
Southern California

I would like to make a donation in the amount of:

\$25 \$50 \$100 \$200 or Other: \$ _____ (Please specify amount)

In support of (check one):

A specific participant A general donation to **Special Olympics Southern California**

Participant's First Name _____ Last Name _____

*****Participant information must be filled out in order to apply to their donation goal**

DONOR INFORMATION

First Name _____ Last Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ E-mail Address _____

METHOD OF PAYMENT:

Enclosed is a cash gift for **Special Olympics Southern California**

- Make check payable to **Special Olympics Southern California**
- Please put "**Move Across California**" in the MEMO area

Charge to: Visa MasterCard American Express

Acct# _____ Expires: _____

Cardholder name: _____ Security Code: _____

Signature: _____ Today's Date: _____

* Please call for card number

Thank you for your support! Federal Tax ID # 95-4538450

Please mail this form to:

Special Olympics Southern California, Attn: Move Across California
1600 Forbes Way Suite 200, Long Beach, CA 90810
(562) 502-1100