



Direct your donation to a specific program:

- Unrestricted (support is given where need is greatest)
- Fee Assistance (support for those in economic need)
- Special Olympics (year-round training & competitions for athletes with mental disabilities)
- Adapted Equipment (specialized equipment for use in sports activities)
- Accessible Transportation (purchase of accessible vehicles to transport participants to year-round activities)

This contribution is:

- Personal Gift
- Business/Company Gift
- Honorary Gift (In honor of whom, and what occasion)
- Memorial Gift (In memory of)
- Matching Gift **Please include Matching Gift Form

Donor _____

Business/Company name _____ (if gift is a company contribution)

Address _____

City _____ State _____ Zip _____

Home Phone _____

Cell Phone _____

Business Phone _____

Email _____

Send acknowledgement to: (Name) _____

Address _____

City _____ State _____ Zip _____

Gift Amount: (circle one) **500** **200** **100** **50** **25** **Other**

Re-occurring gift? How often? _____ How much? _____

Enclosed is my check payable to NEDSRA

Credit Card Type: (circle one) **Visa** **MC**

Number _____ Exp. _____ V-Code _____

Please return this form to NEDSRA: 1770 W. Centennial Place, Addison IL 60101
Fax: 630-620-4598 or email to: klesniak@nedstra.org

Thank you for your generous donation!