Mile High Down Syndrome Association
Donation Form

Your tax-deductible donation to the Mile High Down Syndrome Association will help fund the education and advocacy initiatives described on this Web site. Please indicate if you would like your donation directed to research. We operate solely on gifts from individuals and corporations, and we appreciate every donation, large and small.

Please return completed form to Mile High Down Syndrome Association via fax or mail to:
MHDSA, 2121 S. Oneida Street, Suite 600, Denver, CO 80224, USA
Fax: 303-756-6144.

Specify Donation Amount

_____ $25 _____ $50 _____ $75 _____ $100 _____ $500 _____ Other Amount: $_____

_____ This is a matching gift.

_____ I would like to direct my donation to research.

Donor Information

First Name:	Last Name:
Address:	City:
State:	Zip:
Country:	Day Phone: (We will only call if there are questions about your donation.)
Your email address:	Evening Phone: (We will only call if there are questions about your donation.)

Payment Information

Please select one option from the list below and provide details as required (*).

_____ Check or Money Order Enclosed

_____ Credit Card Payment (complete the section below)

*Name on Card: _____

*Card Type: _____ MasterCard _____ Visa
*Account Number: _____

*Expiration Date (mm/yy): _____

*Signature: _____

*Today's Date: _____

Honor / Memorial

If your gift is in honor/memorial of someone special, please complete this section:

Name of Individual: _____

Please select one occasion from the list below:

_____ Memorial _____ New Baby _____ Birthday _____ Anniversary

_____ Graduation _____ Other

Please send acknowledgement letter to:

Name: _____

Address: _____

City: _____ State/Province: _____

Postal Code (ZIP): _____ Country: _____