

# ONTARIO ARC DONATION FORM



Please mail form to:  
Ontario ARC  
Attn: Development Dept.  
3071 County Complex Dr.  
Canandaigua, NY 14424

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## Your Information

Name: \_\_\_\_\_ Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

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## Your Donation

\$1,000    \$500    \$250  
 \$100    \$ \_\_\_\_\_

## Your Payment

I enclosed a check  
for the amount of \$ \_\_\_\_\_

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## Designate Your Donation

In Memory    In Honor    For the Occasion

Name: \_\_\_\_\_

Please acknowledge my tribute gift to:

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

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

City: \_\_\_\_\_

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

I would like my donation to go to:

Wherever my gift is needed most

Annual Appeal

Cruisin' for a Cause

Gift Wrap Booth

Guardianship