

Contribution Form

This form will add your gift to the honor roll on your page.

Page Information	
Team Be The Match Page Name:	Is this gift for a: <input type="checkbox"/> Team Page <input type="checkbox"/> Personal Page **For Memorial pages, only personal pages are available.
If available, Page URL: www.BeTheMatchFoundation.org/goto/ _____	
What type of page do you have:	
<input type="checkbox"/> Freestyle <input type="checkbox"/> Memorial <input type="checkbox"/> On Campus	

Contribution Detail: If company or organization, please include a contact name	
Contact Name:	Company/Org Name:
Name of Contributor:	
Address:	
City, State, Zip:	
Email Address:	
\$ Amount of Individual Contribution:	Date of Contribution:

Payment Information	
<input type="checkbox"/> Check Enclosed <input type="checkbox"/> Money Order/Cashier's Check enclosed	
Credit Card: <input type="checkbox"/> American Express <input type="checkbox"/> Discover Card <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa	
Credit Card Number	Expiration Date
____ Verification Code (3 digits on back, or 4 on front if American Express)	Name as it Appears on Card:
Billing Address (if different from above)	
Signature Authorizing Card Billing	

Gift Recognition - How would you like the gift to appear on the online page?		
<input type="checkbox"/> Please display NAME and DONATION AMOUNT on Team Be The Match	<input type="checkbox"/> Please display NAME ONLY on Team Be The Match (hide amount)	<input type="checkbox"/> Please DO NOT LIST contributor name on Team Be The Match
List the recognition name for the Team Page honor roll (if none is given, it will be entered as it is under Contribution detail above):		

Mail this form and contributions to: Be The Match Foundation
Attn: Team Be The Match, 500 N 5th St, Minneapolis, MN 55401
Questions? Email: TeamBeTheMatch@nmdp.org