



19350 Euclid Avenue – Euclid, Ohio 44117 – (216) 481-4823

Donation Form

Yes, I would like to help Rose-Mary Center ensure that those with mental retardation and developmental disabilities receive the critical support they need.

Donor Name:

Street address:

City:

State:

Zip Code:

Phone:

E-mail:

Your donation can be a tribute in memory of or to honor someone on a special occasion.

In memory of _____

In honor of _____

Please send acknowledgement of gift to (Notification does not mention amount):

Name:

Address:

City:

State:

Zip:

Would you like to receive our quarterly newsletter? _____ Yes _____ No

___ Yes, my company will be matching this gift, and I will send in the form.

___ Yes, I would like my contribution to remain anonymous

___ Yes, I have remembered Rose-Mary Center through a bequest or other estate planned gift.

Thank you very much for your donation!