

Donation / Sponsorship Form

Kids Get Scleroderma Too!

October 26 & 27, 2018 - Aurora, CO

Are you an individual or organization that would like to help us to host this event by making a donation?

Please fill in the information below.



Name _____

Organization (if applicable) _____

Address _____ City _____ State _____ Zip _____

Phone (_____) _____ email _____

Donation Amount: \$ _____

Credit Card Information

Name on Card _____

Card Type (Visa Mastercard Discover American Express)

Account Number: _____ Exp Date _____ CCV Code _____

How do you want us to use your donation

General Event Support

Scholarship Support (if this support is for a specific person or family, please indicate here) _____

Donation is

in Memory of _____

in Honor of _____

Email a saved copy of this completed form to:

Cyndy Besselievre: cbesselievre@scleroderma.org **or**

Mary Beth Bobik Kadylak: mbbkadylak@sclerodermatristate.org

You may also print this form and mail it to:

Cyndy Besselievre, Executive Director

Scleroderma Foundation Rocky Mountain Chapter

2280 S. Albion Street

Denver, CO 80222

Co-Sponsors:



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