



**Thank you for considering Ronald McDonald House Charities of Charlottesville, Inc. ("RMHC-C") for your donation dollars. We appreciate your generosity, which will help keep families with sick children together.**

Please fill out the form below. \* Indicates required information. Page 2 of this form captures the information necessary for a tribute donation.

Mail or Fax to:

Ronald McDonald House Charities of Charlottesville  
300 9<sup>th</sup> St., SW  
Charlottesville, VA 22903

Fax: 434.295.7735

**Donation Amount**

- \* How much would you like to donate?
  - \$25
  - \$50
  - \$100
  - \$250
  - Other \$ \_\_\_\_\_

**Personal Information**

- \*Title: \_\_\_\_\_
- \*First Name: \_\_\_\_\_
- \*Last Name: \_\_\_\_\_
- Company: \_\_\_\_\_
- \*Address: \_\_\_\_\_
- \_\_\_\_\_
- \*City: \_\_\_\_\_
- \*State: \_\_\_\_\_
- \*Zip code: \_\_\_\_\_
- \*Phone: \_\_\_\_\_
- \*Email: \_\_\_\_\_

**Additional Information**

- This donation is on behalf of a company
- I prefer to make this donation anonymously
- Please send me information on how to include RMHC-C in my estate planning
- I do not want to receive email updates from RMHC-C

**How did you hear about RMHC-C?**

- A McDonald's restaurant
- From a friend/colleague
- Newspaper/TV/Radio/Internet
- Mail
- Facebook
- Previous recipient of RMHC-C services/programs
- Have been a supporter for a long time
- Other: \_\_\_\_\_

**Payment Information**

- Check
- Credit Card
  - \* Credit card type:  Mastercard  Visa
  - \* Card holder's name: \_\_\_\_\_
  - \* Card number: \_\_\_\_\_
  - \* Security code: \_\_\_\_\_ (What are security codes? The card security code, or CSC, is a three or four digit number located on the back of the card; not part of the credit card number.)
  - \* Expiration date: \_\_\_\_/\_\_\_\_/\_\_\_\_
  - \* Billing address for credit card **if different than the address above:**
    - Address: \_\_\_\_\_
    - City, State, Zip: \_\_\_\_\_
  - \* Signature: \_\_\_\_\_  
(Authorizing RMHC-C to charge your account for the amount indicated above)

Tribute Information

Yes, this donation is a tribute to:

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

Tribute type:

- |  |   |
|--|---|
| <input type="radio"/> In memory of           | <input type="radio"/> For the birth of        |
| <input type="radio"/> In honor of            | <input type="radio"/> For the marriage of     |
| <input type="radio"/> For the anniversary of | <input type="radio"/> In celebration of _____ |
| <input type="radio"/> For the birthday of    |   |

Special tribute description:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Mail a letter on my behalf to the individual(s) below to advise them of my donation

\*Full Name: \_\_\_\_\_

\*Address: \_\_\_\_\_

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

\*State: \_\_\_\_\_

\*Zip code: \_\_\_\_\_