

Memorial and Honor Gift Form

The Andre Scott Foundation
67 Diamond Street
Elmont, NY 11003
(516) 855-8417
Email: theandrescottfoundation@yahoo.com

I would like to donate the following amount \$ _____

Donating by Check/Money Order

Please make your check/money order payable to : **Andre Scott Foundation**
67 Diamond Street, Elmont NY 11003

If donating by Credit Card, please provide us with the following information:

Circle your type of Credit Card:

VISA Master Card American Express Discover

Credit Card Number _____ Exp Date: _____

Name on the card: _____

Please provide the following information in full:

Circle Your Preferred Title: Ms Mrs Mr Dr

First Name: _____ Last Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Country: _____ Email: _____

Daytime Phone: _____ Evening Phone: _____

Please provide us with the Gift Card Information

Circle one: **In Memory of** **In Honor of**

Title: _____ First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

I would like a gift card with the amount or without the amount mailed to:

Title: _____ First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

How would you like the card to be signed?

(Please limit this to around 40 character due to limited space on the card)