



PO Box 18496 • Hattiesburg, MS 39404 • (769) 456- 7021 • www.hohfc.org

Memorial/Honorarium Gift Form

<input type="checkbox"/> In honor of:	<input type="checkbox"/> In memory of:	Name _____
Please send memorial/honorarium card to:		
Name _____	Address _____	
City _____	State _____	Zip Code _____

<p><u>I have enclosed:</u></p> <p><input type="checkbox"/> \$25 per month <input type="checkbox"/> \$50 per month</p> <p><input type="checkbox"/> \$100 per month <input type="checkbox"/> \$ _____ per month</p> <p><input type="checkbox"/> A one time gift of \$ _____</p> <p><u>Payment type:</u></p> <p><input type="checkbox"/> By check</p> <p><input type="checkbox"/> By Bank Draft (Please include a check and sign here to authorize.) _____</p> <p><input type="checkbox"/> By Credit Card \$ _____ (We will contact you by phone)</p>	<p>I would like information on the following:</p> <p><input type="checkbox"/> Speaking opportunities (Sunday School, Civic Club, etc.)</p> <p><input type="checkbox"/> Volunteer opportunities</p> <p><input type="checkbox"/> Special Events</p> <p><input type="checkbox"/> Additional donation envelopes - # needed _____</p> <p><input type="checkbox"/> Items Needed List</p> <p><input type="checkbox"/> Capital Campaign</p>
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