



springbrook

Making the Difference for People with Disabilities
For a Lifetime

Donation Form

Date: _____

Title: Mr. Ms. Mrs. Dr.

Name: _____

Company: _____

Street Address: _____

City: _____ State _____ Zip: _____

Phone: (____) _____ Email: _____

I would like to be added to Springbrook's mailing list

I would like to make a gift in the amount of \$ _____

Payment Method: Check enclosed

Credit Card: MC Visa Am Express Discover

Name on Card: _____

Card Number: _____

Exp. Date _____

CID Code (back of card) _____

Springbrook certifies that no goods or services were provided in exchange for this gift. Valuations of Gifts in Kind are the responsibility of the donor. Contributions are deductible for income tax purposes to the extent allowed by law. If an item can not be used directly by Springbrook programs or participants, it is Springbrook's policy to either auction, sell or re-gift the item.

Please include this form with your donation and mail to the following address:

Springbrook
Attn: Donations
2705 State Highway 28
Oneonta, NY 13820

Call (607) 286-7171 x. 343 for questions or more information