

Southeastern Firefighters' Burn Foundation Donation Form

I want to help burn survivors and their families. Enclosed is my tax-deductible donation. * Indicates required information

* Name _____
* Address _____
* City _____
* State _____
* Zip Code _____
* Phone _____
* Email address _____

Please make checks payable to: Southeastern Firefighters' Burn Foundation

Please charge my credit card: ___ Visa ___ MasterCard

Card Number: _____ Expiration Date: _____

___ My employers matching gift form is enclosed.

Living Gift

Enclosed is my living gift: \$ _____

In Memory of: _____

In honor of: _____

On the occasion: _____

Please send an acknowledgment to the following name and address:

More Info

Please send me more information about:

- ___ Volunteering
- ___ Conducting a fund drive
- ___ Touring the Jeffrey Vaden Chavis House
- ___ Including the Burn Foundation in my Will

*Please send form and donation (if check) to:
Southeastern Firefighters' Burn Foundation
3614 J. Dewey Gray Circle, Bldg. C
Augusta, GA 30909*