

Autism Society of Berks County – Donation Form

Enclosed is my donation of \$_____made payable to Autism Society of Berks County

Name: _____

Organization: _____

Mailing Address: _____

City, State, Zip Code: _____

Phone Number: _____ Email Address: _____

Would you like to receive a receipt for your donation? Yes No, my cancelled check will serve as my receipt.

This donation is being made for the following reason:

General Donation

Donation for the Walk for Autism Awareness and Acceptance

Donation Raised at Autism Awareness Event: _____

Donation made in memory of: _____

(deceased's name)

Please send an acknowledgement to his/her family. Name and address of family:

Please specify if we may include your name/donation/event on our Facebook page and/or Twitter feed to publicly thank you for your generosity. Yes No

Thank you for your support!

Send your contribution and form to: Autism Society of Berks County

P.O. Box 6683 Wyomissing, PA 19610