



Sensation Celebration
DONATION FORM

Donation by credit card – Please complete this form and SIGN where indicated.
Mail form to the Sensory Processing Disorder Foundation at the address below
or fax to 303.322.5550

Donation by check – Please complete the form below and mail with your check to the address below.

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Address _____

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(We will never share your information with anyone.)

Donation amount \$25 \$50 \$100 \$1000 Other \$ _____

I'd like to make a regular monthly donation of \$ _____

Check enclosed

Charge to my Visa MasterCard

Account Number _____ Expiration Date _____

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Signature _____ Date _____

Thank you for your generous support!

The Sensory Processing Disorder Foundation is a 501(3)c public charity – taxpayer ID #742490763

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