



# DONATION FORM

Donate Online:  
www.piinkribbonriders.com

Please mail the bottom of this form with your donation to:

Pink Ribbon Riders  
5420 Beckley Road, Suite 334  
Battle Creek, Michigan 49015

Your donation to the PRR will provide direct financial support to men and women that have been diagnosed with breast cancer to help in the daily struggles while battling.

- A PRR FACT: Persons that apply to the Pink Ribbon Riders assistance program card. Each gift card given to patients is a cost of \$18 to \$25 additional to make happen. Your gift will help make these gifts possible for those in need.

### IMPORTANT INFORMATION:

- For mailed donations, please fill this form out completely. We must be able to information as to not cause delays to process your donation.
- All donations are tax deductible as PRR is a 501 C 3 Non Profit organization.
- Donations of \$100 or more will receive a receipt. Please keep your check as a receipt.
- Donations are NON-Refundable and Non- transferable and not a part of any other PRR.
- We accept check and credit card donations.(We cannot accept cash donations by mail.)
- Please send one donation per form.



Please cut here \_\_\_\_\_

### About the Pink Ribbon Riders:

The Pink Ribbon Riders (PRR) is a volunteer based organization that was founded in 2006. The organization was started as founders Jody McKay and Alia Brown found that there were many organizations that helped with research but not many that helped the patient with direct financial assistance for the daily struggles.

**Matching Gifts:** Check to see if your company will match your donation so that you can make a stronger impact for a breast cancer patient in need. Whether you made a donation online or by mail, please mail the company form to the Pink Ribbon Riders. Attn: Matching Gifts. Please include your name and information.

Pink Ribbon Riders® is a registered trademark of the Pink Ribbon Riders organization. The Pink Ribbon Riders tax Id # is 13-4360844

### 1.DONOR INFORMATION. (please fill out completely)

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Mailing Address \_\_\_\_\_ Apt # or Suite \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Email Address \_\_\_\_\_ Phone ( For credit card donors: \_\_\_\_\_

\_\_\_\_ I do not wish to receive a monthly update on Pink Ribbon Riders via email. PRR keeps all emails private and protect you as a donor.

\_\_\_\_ I do not wish to have my name mentioned in the PRR Yearbook donors list. I will be able to see my name on the PRR Yearbook online.

### 2.Your Donation information:

Amount \$ \_\_\_\_\_ . \_\_\_\_\_

\_\_\_\_ Check. Your check # \_\_\_\_\_ Please make checks payable to: Pink Ribbon Riders

\_\_\_\_ Credit Card (Single Payment) Type \_\_\_\_\_ Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ Discover

Credit Card # \_\_\_\_\_ Exp Date \_\_\_\_\_ CVV# \_\_\_\_\_

Signature for Credit Card \_\_\_\_\_ (CVV is on back of your card)

3.Is this donation a MEMORIAL or IN HONOR of DONATION : \_\_\_\_\_ Yes \_\_\_\_\_ No, A general Donation, I do not need a card sent.

### 4.For YOUR memorial card or Memory Card information:

\_\_\_\_ IN HONOR or \_\_\_\_\_ In MEMORY of (name): \_\_\_\_\_

Where does the PRR mail this card to: Name: \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

### 5.How should your name appear in the Card PRR is sending: ( example: Mr., Mrs., Company name, The Jones Family)

\_\_\_\_\_