

**Memorial or Honorarium Gift Form**

Please check: \_\_\_\_\_ **Memorial** \_\_\_\_\_ **Honorarium**

**This gift is in memory/honor of: (This is the information that will be written on the Recognition Certificate or letter (if less than a \$25 donation) that will be sent to the honored person or remembered person's family.)**

**Name** \_\_\_\_\_

**Given by** \_\_\_\_\_

**Remembered Person's Information**

**A Recognition Certificate and letter will be sent to the remembered person's family or honored person in your name.**

**Name of person(s) to receive the letter and Recognition Certificate:**

\_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip Code:** \_\_\_\_\_

**Donor's Information**

**A letter will be sent to you to acknowledge your gift.**

**Name of donor:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip Code:** \_\_\_\_\_

**Phone Number** \_\_\_\_\_ **E-Mail** \_\_\_\_\_

**Amount of gift: (Gifts of \$25 or more includes the Recognition Certificate.)**

\_\_\_\_\_

**Date:** \_\_\_\_\_

**Please send this form and check to: Friends of Living Desert, P.O. Box 100, Carlsbad, NM 88221**

**or call 575-887-0949 to use a credit card.**