



MAIL-IN DONATION FORM

Online: www.pilotstotherescue.org/donate

PLEASE PRINT

Name as it appears on card: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Telephone: (____) _____

Email Address: _____

My check made payable to Pilots to the Rescue is enclosed

CREDIT CARD #: _____ DONATION AMOUNT: \$ _____

SECURITY CODE: _____ EXPIRATION DATE: _____

I would like to become a recurring monthly donor.
Please charge my credit card \$ _____ for 12 months.



Double the Donation
matching gifts made easy

Your gift could be worth more with a matching gift from your employer (even if you are retired)!
Please list your employer (or former employer) here and we will be happy to check:

(or check yourself by going to: <https://www.pilotstotherescue.org/matching-gifts/>)

This donation is: In Honor In Memory

of: _____

Please send acknowledgement to honoree or family

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Sentiments/Message: _____

I HEREBY AUTHORIZE PILOTS TO THE RESCUE TO CHARGE THE ABOVE REFERENCED ACCOUNT:

SIGNATURE: _____ **DATE:** _____

PILOTS TO THE RESCUE is exempt under Section 501(c) (3) of the IRS (EIN: #47-3415146). Your donation is tax deductible.

MAIL TO:
PILOTS TO THE RESCUE
931 Manhattan Avenue, Suite 3
Brooklyn, NY 11222