

Annual Fund Gift
(Print and mail form)

Contributor:

Name/Contact Name _____

Business/Organization (if applicable) _____

Address: _____

City/State/Zip _____

Phone (H) _____ (W) _____ email _____

_____ First Time Contributor _____ Previous Contributor

_____ \$50 One day of full package housing

_____ \$100 Weekend of full package housing

_____ \$250 Week of full package housing

_____ \$500 10 days of full package housing

_____ Other

_____ General

_____ Memorial* In memory of _____

_____ Special Occasion* In honor of _____

_____ Get Well _____ Birthday _____ Holiday _____ Anniversary

_____ Wedding _____ Mother's Day

_____ Other:

please explain _____

*Please send an acknowledgement to:

Name _____

Address _____

City/State/Zip _____

*All contributions are tax deductible.
Make checks payable to Ronald McDonald House of Western Michigan
Mail to: Ronald McDonald House of Western Michigan
1323 Cedar NE Grand Rapids, MI 49503
Thank you for your generous support!*