



INNISWOOD GARDEN SOCIETY

940 S. HEMPSTEAD ROAD
WESTERVILLE, OH 43081

Printable Form for By Mail or In Person Donations

*required information

*Donation Amount \$ _____ I prefer to make this donation anonymously (circle one) YES NO

*First Name: _____

*Last Name: _____

*Mailing Address: _____

*City: _____ *State/Province: _____ *Zip/Postal Code: _____

Phone Number: _____

E-Mail: _____

(although not required, please provide your phone number or e-mail address in case we have a question about your donation)

My company will match my gift (if applicable, circle one) YES NO

(You will need to arrange this with your employer.)

TRIBUTE INFORMATION (if applicable)

This donation is made (circle one) In Honor of In Memory of

Name of the person you wish to honor or remember: _____

Name of the person to be notified of this gift (if applicable): _____

(amount of gift will not be disclosed in notification)

*Mailing Address: _____

*City: _____ *State/Province: _____ *Zip/Postal Code: _____