



PHS

PLANTING SEEDS. GROWING LIVES.

DONATION FORM

Name (as you would like it to appear in listings) _____

Company Name (optional) _____

Address _____

City _____

State _____ Zip Code _____

Home Phone Number _____ Cell Phone Number _____

Email _____

\$50 \$75 \$100 \$250 \$500 Other: \$ _____

Check enclosed (make payable to PHS)

Please remit your gift to :

The Pennsylvania Horticultural Society, Attn: Development Department, 100 N. 20th St. - 5th floor, Philadelphia, PA 19103-1495

Please charge my: American Express Mastercard VISA

Gift Amount _____ Card # _____

Expiration Date (mm/yyyy) _____ Security Code _____

I/we choose to pay in installments. semi-annually quarterly monthly

\$ _____ / period x _____ # of times to be charged. (Each period, a gift in the amount you specify will be charged to your card.)

I/we choose to be a Greener Giver, and give PHS permission to charge to my credit card: \$ _____

annually semi-annually quarterly monthly until I notify PHS to do otherwise.

• I/we would like to make a tribute gift in honor of/memory of (please circle) _____

Please send a notification of this tribute gift to (name and address): _____

If different than donor information above, please send an acknowledgement letter for tax purposes to (name and address): _____

• I/we would like to make a gift to support tree plantings in honor of/memory of (please circle): _____

Please send a notification of this tribute gift to (name and address): _____

If different than donor information above, please send an acknowledgement letter for tax purposes to (name and address): _____

I would like to remain anonymous.

A matching gift form from my company is enclosed. Matching gifts can double or even triple your gift.

I would like to receive information about how I can include PHS in my estate plans.

Please contact the Development Department at 215.988.8800 or giving@pennhort.org with any questions.

Thank you for your support of the Pennsylvania Horticultural Society!