**WUCF gratefully accepts honor and memorial gifts,**

**and treats each gift with individual attention.**

An ***Honorary Gift*** is one that is made to honor people who are still living.

A gift ***In Memory Of*** is a thoughtful tribute to the memory of someone who has passed away, and is often used as a gift to the surviving family.

When an honor or memorial gift is received by WUCF, a special card is sent to the person identified by the donor. The amount of the contribution is never revealed. The donor also receives a letter of acknowledgement for the gift.

If you want to make an honorary or memorial contribution, please print these pages, fill out the information, and mail them alone with your tax-deductible donation to:

**WUCF**

**Tribute Gift**

**12461 Research Parkway, Suite 550**

**Orlando, FL 32826**

If you have additional questions, please contact WUCF Donor Services at (407) 823-0899, or email wucfmemberservices@wucf.org.

**Donor Contact Information**

***Your tax deductible receipt will be sent to this address:***

First Name: Middle: \_\_\_\_\_ Last: \_\_\_\_\_\_

Address:

City: \_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: ( ) Email: \_\_\_\_\_\_

*I am making a gift:*

**In Honor of: \_\_\_\_\_\_\_\_\_\_\_**

**In Memory of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Acknowledgement**

***A card announcing your tribute will be mailed to*:**

**First: Middle: Last:**

**Address:**

**City: State: Zip:**

**Phone: ( ) Email:**

**Relationship to person being memorialized**:

*If this is a memorial gift, please note the relationship of the person above to the person you are honoring, i.e. the person above is the widow/child/ parent/ etc.*

**How should your name, family, or organization appear on the card?**

A donation to WUCF was made from:

* If you would like to remain anonymous on the card, please check here.

If you choose this option, the card will say simply:

*An anonymous donation in your honor was made to WUCF.*

If you would like to include a special message in the card, please write it here (or, if you prefer, you may write a message on your own stationary and send it in with this donation and we will include your handwritten note inside the card.)

Enclosed Donation Amount (this will not be revealed to the recipient): $

* Check or Money Order is Included
* Please Charge My Credit Card Circle one: Visa/MasterCard/Discover/AmEx

Card Number: Expiration Date:

Signature: