



## Donation Form

Please make check payable to Angel Charities, Inc.

**Please choose one:**

- This donation is an Event Gift or Sponsorship
- This donation is in support of an AngelRide Participant named: \_\_\_\_\_

**Amount of donation:** \$\_\_\_\_\_ *Thank you!*

**Please fill out YOUR information below:**

\_\_\_\_\_  
First Name, Last Name

\_\_\_\_\_  
Additional Donor: First Name, Last Name

\_\_\_\_\_  
Organization Name (if applicable)

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip code

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Phone Number

**Matching Gifts:** If your company requires written information from us, please include that form. If you can request a Matching Gift on-line, make sure to choose Angel Charities, Inc, Old Lyme, CT. Tax ID 47-2608324.

**Mail donations to:** Angel Charities, PO Box 1013, Old Lyme, CT 06371

**Contact us** if you have any questions: [LynnP@AngelRide.org](mailto:LynnP@AngelRide.org)

*Donations are deductible to the fullest extent allowed by law. Donations of more than \$250.00 will receive a letter of acknowledgement for tax purposes. Donations are non-refundable and non-transferable.*

**Angel Charities, Inc.**   
PO Box 1013  
Old Lyme, CT 06371  
Tax ID# 47-2608324

*AngelRide is presented by Angel Charities, Inc an all-volunteer 501(c)(3) organization.*