



# the Haden Institute

## DONATION FORM

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Name (as you want it listed in donor records.)

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Street Address (Line 1)

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Street Address (Line 2)

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City

State

Zip

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Email address (for donation acknowledgement)

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Phone number (for questions of clarification)

My donation is in \_\_\_ honor \_\_\_ memory

of \_\_\_\_\_

- Enclosed is my check for \$ \_\_\_\_\_
- This is an undesignated donation

MAKE YOUR PAYMENT TO: HADEN FOUNDATION, INC.  
MAIL COMPLETED FORM TO:  
The Haden Institute  
C/O Haden Foundation, Inc.  
Mark Ritchie  
505 Timberlane Trail  
Salisbury, NC 28147-7808  
(704) 603-8754

*Thank you for your support!*

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