

# Camp Lochearn Donation Form



**Donate today to make a difference in the future of Lochearn and the lives of Lochearn Lassies!**

Your donation will allow us to provide scholarship opportunities and maintain our incredible facilities and programming areas for our campers. With your help, our Lochearn community will thrive and the lives of Lochearn Lassies will continue to be touched by the Lochearn motto:

*To be honest, to be kind, to seek a deeper understanding of the beauty about us.*

*To make the whole camp happier for our being here.*

*To make and to keep friends, but to do so without surrendering our ideals, and above all, to keep friends with ourselves. To grow to have more courage and self-confidence, and to take home an open mind, and a kind and caring heart.*

Please complete this donation form, print and mail with your check or credit card information to our winter office: Camp Lochearn - PO Box 358376 - Gainesville, FL 32635.

**Donation Type**     Scholarship Fund     Capital Improvements

Scholarship Fund Donations through the American Camp Association (ACA) are tax deductible. The ACA will mail you a donation acknowledgement a month after receipt. The ACA also provides opportunities for Planned Giving and Corporate Support. Capital Improvement Donations are not tax deductible, but are extremely appreciated by our campers. Naming opportunities are available for significant donations.

## Method of Donation

**Check** Made out to Camp Lochearn and enclosed with this donation form.

**Credit Card (Mastercard or Visa)** Please provide your information and signature below to authorize Lochearn to charge your credit card. Please make sure to indicate the amount of the donation.

**I authorize Lochearn Camp, LLC to charge my credit card listed below in the amount of:**

- \$100.00     \$300.00     \$500.00     \$1,000.00     \$3,000.00  
 \$5,000.00     \$10,000.00     \$25,000.00     \$50,000.00     Other: \$ \_\_\_\_\_

Cardholder Name (print) \_\_\_\_\_

Card No. \_\_\_\_\_

Exp. Date (mm/yy) \_\_\_\_\_

Security Code \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

We have made this a fillable PDF so you may electronically complete it for your convenience. However, we do not suggest saving and emailing credit card information. Please remit donation via mail.

Planned Giving and Corporate Support opportunities are also available through the American Camp Association. For more information, please contact the Lochearn office.

## Thank You!