

Doug Flutie, Jr. Foundation Donation Form



Name: _____ **Email:** _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone: _____

Is this donation In Honor or In Memory of someone? Yes _____ **No** _____

If “Yes”, please indicate below who should be acknowledged for your contribution. Please note that the Foundation will not inform the recipient of the amount of your donation.

(Circle one) In Memory of / In Honor of - Name: _____

Name of person to be acknowledged of donation (If different from above) _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Please use the backside of this form for any special notes or requests.

The Doug Flutie, Jr. Foundation for Autism – PO Box 767, Framingham, MA 01701