

# I want to change the lives of animals in South Central Indiana.



## SUPPORT FORM

Name \_\_\_\_\_

*(as you would like it to appear on donor listings)*

I do not wish for my name to appear on donor listings.

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Email \_\_\_\_\_

Pets Alive will never share your email address with anyone.

I would like to contribute  \$250  \$100  \$50  \$25  Other \$ \_\_\_\_\_

*Pets Alive is a 501 (c) 3 and all donation are tax deductible as permitted by law.*

Pets Alive charges clients less than half of what it costs the clinic to perform the surgeries.

### **PAYABLE BY**

#### **CHECK**

Make checks payable to Pets Alive, Inc and mail with completed form to  
2444 South Walnut St, Bloomington IN 47401.

#### **CREDIT CARD**

Name on Credit Card \_\_\_\_\_

Card Number \_\_\_\_\_

Circle One: Visa Mastercard Discover Exp Date \_\_\_\_\_

#### **ONLINE**

Credit card donations can also be made online at [www.petsaliveindiana.org](http://www.petsaliveindiana.org) with PayPal.

Please Indicate if this gift is made in honor or memory of a loved one.

In Honor/Memory of \_\_\_\_\_

Circle One Cat Dog Person

Please notify Name \_\_\_\_\_

Address \_\_\_\_\_

Questions? Contact Charlotte Walker, Development & Communications Director, at  
[charlotte@petsaliveindiana.org](mailto:charlotte@petsaliveindiana.org)

Thank you for your support! Pets Alive has performed over 50,000 surgeries since opening in 2005 . Our success is only possible with supporters like you.



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