

FAIRCHILD SOCIETY CONTRIBUTION FORM

Humanitarian Foundation

Grottoes International & Daughters of Mokanna

<https://hfgrotto.org/donate/members-friends>



Date: _____

Contribution Amount: \$ _____

Grotto/DoM to Credit: _____

Email Address: _____

Please circle Grotto or DoM

Name

Phone Number

Address

City State Zip Code

Special Wording on Certificate _____

FAIRCHILD SOCIETY CONTRIBUTION/ PLEDGE

____ Monarch Circle (\$250.00) \$ _____ contribution
____ Grand Monarch Circle (\$500.00) \$ _____ contribution
____ Fairchild Silver Level (\$1,000.00) \$ _____ contribution
____ Fairchild Emerald Level (\$2,500.00) \$ _____ contribution
____ Fairchild Gold Level (\$5,000.00) \$ _____ contribution
____ Fairchild Platinum Level (\$10,000.00) \$ _____ contribution
____ Fairchild Sapphire Level (\$15,000.00) \$ _____ contribution
____ Fairchild Amber Level (\$20,000.00) \$ _____ contribution
____ Fairchild Ruby Level (\$25,000.00) \$ _____ contribution
____ Fairchild Diamond Level (\$35,000.00) \$ _____ contribution
____ Fairchild Double Diamond Level (\$50,000.00) \$ _____ contribution
____ Fairchild Double Diamond & Ruby Level (\$60,000.00) \$ _____ contribution

Is Person making contribution _____ Member _____ Non-Member

AUTOPAY

If you would like to set up an autopay monthly, quarterly, semi-annual, or yearly; please specify when and the amount:
Monthly _____ Quarterly _____ Semi-Annual _____ Yearly _____ Amount: _____

** Once final payment of the current level is received, the amount will be rolled to the next level.

Credit Card Payment Information

Card Number: _____ Card Holder Name: _____

Expiration Date: _____ CVV #: _____ Card Holder Zip Code: _____

Card Holder Street Address: _____

___ Visa ___ MC ___ AMEX ___ Discover Signature: _____

Card Holder Email Address: _____ Email Receipt: Yes No

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Visit us online at <https://hfgrotto.org/donate/members-friends>

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