



## Sensation Celebration DONATION FORM

**Donation by credit card** – Please complete this form and SIGN where indicated.  
Mail form to the Sensory Processing Disorder Foundation at the address below  
or fax to 303.322.5550

**Donation by check** – Please complete the form below and mail with your check to the address below.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

ZIP/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Email \_\_\_\_\_

(We will never share your information with anyone.)

**Donation amount**    \$25    \$50    \$100    \$1000    Other \$ \_\_\_\_\_

I'd like to make a regular monthly donation of \$ \_\_\_\_\_

Check enclosed

Charge to my    Visa    MasterCard

Account Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Security code (three digit code on back of card) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Thank you for your generous support!**

The Sensory Processing Disorder Foundation is a 501(3)c public charity – taxpayer ID #742490763

5655 S. Yosemite Street, Suite 305 ~ Greenwood Village, CO 80111 ~ 303.794.1182 / fax - 303.322.5550  
[www.SPDFoundation.net](http://www.SPDFoundation.net)