



# Dallas Area Parkinsonism Society

## Pledge/Contribution Form

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Visit us at [www.daps.us](http://www.daps.us)

*Yes, I want to make a difference. Here's my Pledge:*

\$25    \$50    \$100    \$250    \$500    \$1000    other

Frequency:  One time    Quarterly    Monthly   End Date \_\_\_\_\_

NAME

ADDRESS

CITY, STATE, ZIP

PHONE

EMAIL

### Method of Payment:

Check    Visa    MasterCard

Account #

Exp. Date

Name on Card

Signature

**This gift is :**  in honor of    in loving memory of:

Please send acknowledgment to: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I do not need a written confirmation of my donation. My check is my receipt.