



MAIL-IN DONATION FORM

DONOR INFORMATION

Donor Name (First Name and Last Name) _____

Organization Name (Fill this out only if you are making this donation on behalf of an organization) _____

Each year, we publish a list of our donors in our annual report. If you would prefer not to have your name/company listed, please let us know by checking the box below.

☐ I prefer my gift to be recorded as anonymous. Please do not publish my name in any donor listings or reports.

CONTACT INFORMATION

Address (If you are making this donation on behalf of an organization, please provide the company's address) _____

City _____ State _____ Zip Code _____

Email Address _____

Telephone Number _____ (circle one) HOME OFFICE MOBILE

Which best describes your connection: ☐ parent ☐ coach ☐ community member ☐ other _____

DONATION INFORMATION

Donation Amount: ☐ \$50 ☐ \$125 ☐ \$300 ☐ \$500 ☐ \$1,000 ☐ Custom Amount _____

Donation Purpose: ☐ General Donation* ☐ TeamMTB Program ☐ Trail Rangers Program

☐ Girls Ride Initiative ☐ Trail Development

*General Donations are considered unrestricted funds and may be used to fund the greatest organizational need.

**PLEASE MAIL THIS COMPLETED FORM WITH A CHECK MADE PAYABLE TO
GEORGIA CYCLING ASSOCIATION TO:**

**Georgia Cycling Association
Attn: Development
460 W Main Street - Suite 102
Blue Ridge, GA 30513**

Tax Information: The Georgia Cycling Association is registered as a 501(c)(3) non-profit organization. This means your contribution to our organization is fully tax-deductible to the extent permitted by law.