



Date: _____

Donation amount: _____

Your name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Recipient's name (if this is a gift): _____

Recipient's address: _____

City/State/Zip: _____

Gift message to read: _____

- Animals: 1. _____ 2. _____ 3. _____
4. _____ 5. _____ 6. _____
7. _____ 8. _____ 9. _____
10. _____ 11. _____ 12. _____

Enclosed is my check payable to GLAZA

Charge my: Visa MasterCard American Express Discover

Acct # _____ Exp. Date _____

Signature _____