



Make It Count
FOUNDATION

“Good people helping good people”

Thank you for your donation. Please complete this form and mail it to the address listed below.

Name: _____

Address: _____

City: _____

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Would you like to receive our email newsletter? (circle one) Yes / No

Mailing In A Check: Please make check payable to Make It Count Foundation and mail to address below.

Credit Card: I authorize Make It Count Foundation, Inc to charge my pledge to my credit card.

Pledge Amount \$ _____

Credit Card Type: Visa MasterCard

Credit Card Number: _____ - _____ - _____ - _____

Expiration Date: (MM/DD/YEAR) _____

CVV Security Code (3 or 4 numbers on back of card) _____

Name as it appears on card: _____

Signature (Required): _____

Date: _____

If you have any questions please email us at info@makeitcountfoundation.org

Make It Count Foundation, PO Box 370, West Islip, New York 11795