



# TRIBUTE AND MEMORIAL GIFT REQUEST FORM

## CARD & RECIPIENT INFORMATION

Please, indicate which card you would like us to send on your behalf

Tribute 1       Tribute 2       Memorial

Occasion For Tribute \_\_\_\_\_  
(Birthday, Anniversary, Holiday, Birth, etc.)

Tributes and memorials can be processed in any amount equal to or above \$20.00 (we do offer significant discount for quantities). Please, indicate the amount of your gift below:

Amount of Gift    \$ \_\_\_\_\_  
(The amount of your gift will not be disclosed)

Honoree's Name \_\_\_\_\_

Recipient (if different from Honoree) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## MEMBER INFORMATION

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Member No. \_\_\_\_\_

Email \_\_\_\_\_

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

Please, make your check payable to the African Conservancy and return this form via mail to:

African Conservancy  
2590 San Clemente Avenue  
Vista, CA 92084