



## Friends of the Litchfield Community Greenway, Inc. Community Appeal

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Are you interested in being on our email contact list?

Email: \_\_\_\_\_

Please print your name as you want it to appear in our newsletter.

\_\_\_\_\_

Please check if you wish your gift to be anonymous.

Be Green! Donate online at [www.litchfieldcommunitygreenway.org](http://www.litchfieldcommunitygreenway.org)

Be a Greenway Trailblazer! Your Support at any of the following levels will lead the way!

Your generous donation is fully tax deductible.

- \$5001 - \$10,000 Trailblazer
- \$2500 - \$5000 Pathfinder
- \$1000 - \$2499 Naturalist
- \$500 - \$999 Conservationist
- \$250 - \$499 Explorer
- \$100 - \$249 Trekker
- \$1 - \$99 Friend

I would like my donation to honor/memorialize:

\_\_\_\_\_

### METHOD OF PAYMENT

- Check enclosed
- Please charge my gift of \$ \_\_\_\_\_ to my:
  - MasterCard  Visa  AMEX

Name on Card:

\_\_\_\_\_

Billing Address if different:

\_\_\_\_\_

Acct No. \_\_\_\_\_

Exp. Date \_\_\_\_\_ CVC 3-digit code \_\_\_\_\_

Signature:

\_\_\_\_\_

I am so excited about the Greenway I would like to make a monthly donation in the amount of

\$ \_\_\_\_\_ on this card for the next 12 months.

PRINT THIS COMPLETED FORM AND MAIL IT WITH  
YOUR CHECK OR BILLING INFORMATION TO:

Friends of the Litchfield Community Greenway, Inc.  
P.O. Box 778  
Litchfield, CT 06759