

Donation Form

Please Print and Mail to:

Alyce Hatch Center 1406 NW Juniper St Bend, OR 97701

Name:	
Address	1
City, State and Zip	
Please make checks payable to: Alyce Hatch Center, Inc. My check is enclosed for: \$25 \$50 \$100 Other:	
Credit Card Visa MC Amex	
Credit Card #	
Expiration Date:	
Signature:	