

BINDLESTIFF FAMILY CIRKUS



Please Complete All Sections of this form.

Contact Information

Last Name(s) _____ First Name (s) _____

Company _____

Address _____

Address _____

City _____ State _____ Zip _____

Email: _____

Donation Amount

\$25 \$50 \$100 \$250 \$500 \$1000

Other _____

Payment Information

Check Enclosed (please make checks payable to: Bindlestiff Family Variety Arts, Inc.)

Credit Card Type (Amex/Visa/Mastercard) _____

Name as it appears on Card _____

Card Number _____ **Expiration** _____

Signature _____

Phone: _____

Please mail completed form along with payment to:

Bindlestiff Family Variety Arts, Inc.
PO Box 386
New York, NY 10009

Bindlestiff Family Variety Arts, Inc. is a registered 501c (3) non-profit organization. All donations are tax-deductible to the extent allowed by law.