Cleveland Metroparks Donation Form



DONOR INFORMATION:						
Donor Name(s):(as it should appear for recognition)						
Addr	ess:					
City:			State:	Z	(ip:	
Phon	ne: ()	E-Mail:				
TRIE	BUTE INFORMATION:					
This	gift is 🚨 in memory of	$lacksquare$ in honor of $\begin{tabular}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$				
Send Notification of my Memorial/Tribute gift to (optional):						
Name	e(s):					
Addr	ess:					
City:			State:	;	Zip:	
GIF1	ΓINFORMATION:					
Amo	ount: \$ (p	olease make check pay	able to Cleveland M	etroparks)		
 All gifts of \$250 or more include benefits in the Emerald Necklace Giving Circles 						
	 If you would like to dor 	nate by credit card, ple	ease call 216-954-343	80		
Plea	se Direct my Donation to	:				
Tril	oute Gifts:					
	Legacy Fund	☐ Other (ple	ease select below)			
Mos	st Popular Funds:			Nat	ure Centers:	
	Where it is Needed Most	☐ Police K-9	9 Unit		Brecksville Nature Center	
	Trails Fund	Police Mo			CanalWay Center	
	Conservation Fund		cation Fund		North Chagrin Nature Center	
	Fishing Fund		Education Fund		Rocky River Nature Center	
	Land Protection Fund	☐ Youth Ou	ıtdoors Fund		Watershed Stewardship Center	
	ervations/Locations (Curre	-				
	Acacia	☐ Garfield F			Squire's Castle	
	Bedford	☐ Huntingt			South Chagrin	
	Brecksville		out Lodge ·		Rocky River	
	Edgewater Park	☐ North Ch	agrin 			
Other:						
	 Emerald Necklace Endowment Fund (please make check payable to Emerald Necklace Endowment Fund) 					