



Mail-In Donation Form

RETURN BY MAIL TO:

DAI

13710 Struthers Rd Suite 120
Colorado Springs, CO 80921 USA

Phone: 719.598.7970

Email: enagage@daintl.org
www.daintl.org

CONTACT INFORMATION:

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

E-Mail: _____

CHECK OR CASH DONATION:

Cash/check amount: \$ _____

Please make checks payable to DAI.

ELECTRONIC FUNDS TRANSFER DONATION:

EFT amount: \$ _____ Frequency:

Please enclose a voided check.

Start Date: 1st 15th

CREDIT CARD DONATION:

CC amount: \$ _____ Frequency:

Card number: _____ Start Date: 1st 15th

Name on card: _____ Card type:

Signature: _____ Exp. date: _____ CVV/CSC: _____

GIFT DESIGNATION:

Use this gift for:

Designation instructions: _____

RECEIPTS: Email Paper Year End Statement Only

DAI UPDATES: Email Paper

THANK YOU FOR YOUR GIFT!