

# Higher Power Foundation Donation Form

## Our Mission

1. Providing financial support grants for people who need recovery to attend spiritual and life training events as approved by the Support Grant/Scholarship Committee of the Board of Directors.
2. Support other charitable organizations as designated by approval of the Board of Directors.

### Donor Information (please print or type)

Name	
Billing address	
City	
State	
ZIP Code	
Telephone (home)	
Telephone (business)	
E-Mail	

### Donation Information

I (we) donate a total of \$ \_\_\_\_\_ to be paid:  
\_\_\_\_ now \_\_\_\_ monthly \_\_\_\_ quarterly \_\_\_\_ yearly.

I (we) plan to make this contribution in the form of:  
\_\_\_\_ cash \_\_\_\_ check \_\_\_\_ credit card \_\_\_\_ other.

Credit card type	
Credit card number	
Expiration date	
Authorized signature	

### Acknowledgement Information

Please use the following name(s) in all acknowledgements:

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\_\_\_\_ I (we) wish to have our gift remain anonymous.

Signature(s)
Date

Please make checks, corporate matches, or other gifts payable to:

Higher Power Foundation Inc.  
C/O Lisa McCurley  
1102 Mayan Way  
Austin, TX 78733