



I want to help sustain the park by becoming a Pisgah Patron!

Contributor Information (Please Print)

Name _____

Street _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

E-mail _____

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

Credit/Debit Card # _____

Credit/Debit Card Type: _____ Expiration (mm/dd/year) _____

You may withdraw \$ _____ a month from my selected account. I agree to the terms and conditions that allow for the monthly donation withdrawal from my account.

Signature (required) _____

Date (required) _____

I wish my gift to remain anonymous. *Please don't acknowledge my support in your publications.*

Contact me about volunteering.

Please complete this form and mail to:

Friends of Buford Park & Mt. Pisgah, PO Box 5266, Eugene, OR 97405