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| **Help support Hope Lodge Houston and leave a legacy.**Leave a gift of a lifetime! Create a personalized brick and/or paver to be installed on the grounds of the campus in the Healing Garden. This is a meaningful way to honor (or memorialize) family and friends. |

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| **Gift Information**  |

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|  |
| \* Required radio button group.             | Select Donation Amount: Required  | Select Donation Amount: Required radio button group.

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|  | $35 Select Donation Amount:    . [[M0:global:warn_label]] |
|  | $80 Select Donation Amount:    . [[M0:global:warn_label]] |
|  | $100 Select Donation Amount:    . [[M0:global:warn_label]] |
|  | $200 Select Donation Amount:    . [[M0:global:warn_label]] |
|  | Other $ Select Donation Amount:    . [[M0:global:warn_label]]Enter amount.  |

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| Warning |  |

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| **Gift Information**

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| \* Required radio button group.             | I would like my gift to be credited to: (I’d like a drop down list here if possible, with the following choices): RFL Alvin/Manvel, RFL Austin County, RFL Baytown, RFL Conroe, RFL Cy-Fair, RFL Dickinson\*, RFL Galveston, RFL Greater Bay\*, RFL Greater Fort Bend, RFL Greater Lake Houston, RFL Houston, RFL Katy, RFL Mainland\*, RFL North Channel, RFL Northwest Harris, RFL South Brazoria, RFL Southeast Harris, RFL The Woodlands, RFL Waller (RFL PVAMU feeder), Houston Cattle Baron’s Ball, Holiday Shopping Card Required  |

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| **Billing Information**  |

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| \*  | First Name: Required A first name is required. Enter first name. This is a required field.  |  |  |
| \*  | Last Name: Required A last name is required. Enter last name. This is a required field.  |  |  |
| \*  | Home Address Required Billing address is required. Enter billing address. This is a required field.  |  |

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| \*  | City: Required A city is required. Enter city. This is a required field.  |  |

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| \*  | State: Required A state or province is required. Select your state from the list. This is a required field.  |  |

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| \*  | ZIP: Required A zip or postal code is required. Enter Zipcode. This is a required field.  |  |  |
| \*  | Email Address: Required An email address is required. Enter email address. This is a required field.  |  |

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| Warning Cue | An email address is required. |

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| **Paver Information**  |

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Option #1: 8 x 8 Paver

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| **Payment Information**  |

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|    | Credit Card Type: Select the type of credit card to use for this donation. Select the type of credit card to use for this donation. Required | Credit Card Type:

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| --- | --- | --- | --- |
| Visa | Discover | American Express | MasterCard |

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| \*  | Credit Card Number: Required Credit card number is required.  |  |  |
| \*  | CVV Number: Required CVV number is required.  | [What is this?](http://help.convio.net/site/PageServer?s_site=tacs&pagename=user_donation_cvv)  |  |
| \*  | Select month of credit card Expiration Date: Required RequiredSelect Expiration Year  |   |

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| All gifts made go to the American Cancer Society Hope Lodge Houston.You may also by check. Complete one form per brick or paver, make checks payable to: American Cancer Society Hope Lodge Houston, and mail to: American Cancer Society Attn: Gina Mayfield 2500 Fondren Rd., Suite 100 Houston, TX 77063*The American Cancer Society is a qualified 501(c)(3) tax-exempt organization and donations are tax-deductible to the full extent of the law. No goods or services were provided for this gift. Please consult your tax advisor regarding specific questions about your deductions.* |
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