

CAMP ARCADIA DONATION FORM

Please use this form when you send a donation to Camp Arcadia. This will help ensure that your donation is properly tracked.

If you would prefer to make an on-line donation (credit card processed on-line) then please visit camp-arcadia.com.

Donor(s) Name: _____

Mailing Address: _____

City, State Zip: _____

Home Phone: _____

Donation Amount: _____

This gift is given to honor the memory of: _____

This gift is given in celebration of: _____

Special Instructions regarding gift: _____

PAYMENT METHOD:

- Check (payable to Camp Arcadia, PO Box 229 Arcadia MI 49613), or
- Visa/Mastercard/Discover

Card Number: _____

Expiration Date: _____ 3 Digit Security Code: _____

- Billing address for credit card is same as above
- Different billing address _____

Signature: _____

Forms may be faxed to Camp Arcadia (if using credit card) at (888) 753-1922 or mailed to **Camp Arcadia PO Box 229 Arcadia MI 49613.**

Questions? Call (231) 889-4361