

Dominican Sisters of Hope
Development Office
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845-569-8020

Please feel free to print this donation form and mail it along with your gift to the address above. (Please Print Clearly)

Name _____

Address _____

City _____ State _____ Zip _____

Telephone _____ E-mail _____

Gift amount \$ _____ Check enclosed__ (Make check payable to *Dominican Sisters of Hope*)

or Charge my: __ Visa __ MasterCard __ Discover Card __ American Express

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My gift is for the: __ Elderly Sisters __ Active Ministries __ Wherever it is most needed

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Name _____

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City _____ State _____ Zip _____

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If you wish to honor a loved one, please provide us with the following information:

Gift in Honor of _____ Or Gift in Memory of _____

Thank you for your continued support and kindness!

Please feel free to contact us with any questions or concerns that you may have.