



2021 Annual Giving

Contact Information: Please update your information below:

Name:	
Company:	
Address:	
Phone Number:	
Email:	
Primary Contact:	

***Contribution:** Please mark selections below and update amount as desired.

One-Time Contribution	Annual Pledge
<input type="checkbox"/> Yes, I would like to make a one-time contribution to CHREF. I've enclosed my payment of: <input type="checkbox"/> \$2,500 <input type="checkbox"/> \$1,000 <input type="checkbox"/> \$500 <input type="checkbox"/> Other: _____	<input type="checkbox"/> I pledge to annually contribute: <input type="checkbox"/> \$5,000 <input type="checkbox"/> \$1,000 <input type="checkbox"/> \$500 <input type="checkbox"/> Other: _____ <input type="checkbox"/> We wish to establish a named endowment fund. Please contact us.

Acknowledgements:

- I(we) wish our gift remain anonymous.
 - Please use the following name(s) in acknowledgements: _____
- Donations are designated to the CHREF annual fund, unless otherwise noted.*

SIGNATURE: _____ DATE: _____

Payment Information:

- Check enclosed. No.: _____
- Credit Card charge. Authorized amount: _____

Credit Card Holder			
Credit Card Number			
Expiration Date		Verification Code	
Authorized Signature			

Return this form, along with check or other payment payable to:
 Colorado Horticulture Research & Education Foundation
 959 S. Kipling Pkwy, Suite 200, Lakewood, CO 80226.
 303.758.6672 | info@coloradonga.org