

When you join our convenient program for monthly giving you immediately maximize

your support for Sea Inspiration's (SI) ongoing work to help people and oceans heal each other! You also allow us to budget and plan our activities more effectively. It's easy, secure, and saves you and SI time. You simply authorize SI to receive a monthly gift from your checking account or credit card. Using your checking account is preferred because it saves SI even more time and fees!

Make your gift go farther than ever & help more people and oceans.

Upon signing and returning the enrollment form below, your monthly gift will be electronically transferred from your account to SI. A record of each gift will show on your regular bank or credit card statement. We will send you a taxdeductible receipt at the end of each year, and this will continue monthly unless you inform us that you wish to stop.

Reasons to enroll today!

Convenient for you:

- No more postage costs.
- No more check charges.
- No lost checks.
- No more time spent writing checks.

Increased value to the work we do on your behalf:

• Speeds up the arrival of your gift so funds can be put to immediate use.

• Reduces administrative costs, maximizing the impact of your donation.

- Money saved is used to do more good work.
- Predictable cash flow enables SI to plan more effectively.

MORE great benefits:

• It's easy to change or stop your contributions by visiting our donation page at www.seainspiration.org/monthly. Feel free to call us 800 399-9070 or e-mail us at donations@seainspiration.org.

• Continue to receive our regular updates.

• AND, donors of \$18 or more receive an SI logo t-shirt as our thank-you gift to you!

	For your records: I am donating \$_	each month, via		
my _	account ending in _	(last four numbers);		
	submitted enrollment on	(date)		

Please detach here and return to Sea Inspiration – keep above portion for your records

YES! COUNT ME IN! I want to be a member of Sea Inspiration's life-affirming monthly giving program.

My signature below authorizes SI to receive the following:

	🛛 \$10	🗖 \$15	🗖 \$18	🛛 \$20	🗖 \$25	□ \$50	Other \$				
Please debit my account on this day of each month: D 5 th or D 20 th											
G From my Checking Account (Preferred : Please include a check as your first donation with this form.)											
□ Via Credit Card (please check box): □ MasterCard □ VISA □ American Express □ Discover											
Account Number:					Expiration Date:/						
Name:											
Address:											
City:						State:		Zip Code:			
E-mail: Tel (circle - mobile/home/work):											
Signature*:			Date Signed:								
Sign	uture requireu		or checking us	well us creuit (curu.						

I understand the amount I have specified on this form will be transferred directly from my account into SI's account in the amount I indicated, and I may increase, decrease, or suspend these transactions at any time by contacting SI via telephone, email, or postal mail. All gifts provided to SI that originate as ACH transactions comply with U.S. law.