

Please complete this form and return to Touchstone Farm

Touchstone Farm
home of

Pony Farm and Horse Power

## Mail in this form to:

13 Pony Farm Lane Temple, NH 03084 www.touchstone-farm.org office@touchstone-farm.org Tel. 603.654.6308

Name:	(optional Business Name)				
Address:					
City:					
Email:	Phone:				
The information above is <b>REQUIRED</b> to proces	s your donation but would you like to be	listed as anonymous? Yes			
*PLEASE NOTE: A 4% credit card proc with all credit card donation payment donation amount to help support the	ts. Are you interested in adding	the 4% charge to your			

		erp support the farm	in a greater amount.	
	SIGNATURE:			
DONATION For: Please	check			AMOUNT:
	Scholarships Horse			S
Child Programs Veterans Programs In Honor of In Memory of			Diametric Character	
Note about this gift or name of person to acknowledge:			Please Choose:	
				One-time donation
				*Reoccurring donation
Payment Type: (select one)	□ Check Enclosed □	Name on Credit Card:_		subtotal
	(make checks payable to	Credit Card Number:		*4% fee
MasterCard VISA	Touchstone Farm)	Security Code:	Exp. Date:	TOTAL
participate as a reod <b>card</b> directly to Touch more predictable so	ccurring donor, <b>your donat</b> astone Farm either monthly that your donation can sto	ion can be transferre or annually. Your do art working immediat	d conveniently from you onation will go even furtled ely to help the people wi	ely change lives. When you ur checking account or credit her because our income will be ho are served by our mission.
*I plan to make a _	Monthly gift in the an	nount of: \$	Annual gift	in the amount of: \$
checking/credit card a above. I understand t	hat I may increase, decrea	uture donations will be se, or suspend my gif	oe transferred directly from the tat any time through the	om my account as stipulated
l	er that your credit card info be processed. Thank You!	rmation must be cur	rent, including if your cro	edit card expires. Otherwise
Signature (required):			[	Date