Suggested giving amount is \$10. Please feel free to donate a different amount, if you so desire. Donations of \$70 or more will be eligible to receive a short-sleeved T-shirt. Donations of \$100 or more will be eligible to receive a short-sleeved or long-sleeved T-shirt.

Enclosed is my/our gift of	\$10 Other \$	\$20	\$70	\$100	
Name					
Spouse's/Partner's Full Name	·				
Address					
City	State	e	ZIP		
Preferred Phone ()					
Email					
Method of Payment					
Charge my: ☐ VISA	MasterCard	☐ Ameri	can Express	Discover (Card
Number:		Exp. Date (mm/yy):			
Name as it appears on card:				Security (Code:
Signature:					
Check is enclosed, paya	able to CSU Fou	ındation (P.() Boy 1870 Fo	rt Collins CO	80522)
Please write "CoCoRaH		,	7. BOX 1070, 1 O	t comins, co	30022).
		illie.			
A matching gift form is e					
If you make a gift of \$70 or more to CoCoRaHS short-sleeved T-shirt, a OR a long-sleeved T-shirt (they will	and if you give \$10	00 or more, yo	ou can choose be	tween a short-sl	leeved
My gift is between \$70 and \$99.99,	and I	My gift is \$100 or more, and I choose one of the following			
choose one of the following short-s T-shirt sizes:	sieeved	Short-Slee	eved	Long-Sleeved	
Small			Small		Small
Medium			Medium		Medium
Large			Large		Large
X Large			X Large		X Large
2X Large			2X Large		2X Large
3X Large			3X Large		3X Large
I decline the gift item.			I declir	ne the gift item.	G2514/600

I decline the gift item. G2514/60073