

# Western Washington Fruit Research Foundation

PLEASE SEND YOUR DONATION ALONG WITH THIS FORM

Enclosed is my gift of:

\$5000  \$1000  \$500  \$100  \$50  \$25 \$  Other



(Make check payable to WWFRF)

Please designate my monetary gift toward:

Where it is needed most!

For the Fruit Garden

For project \_\_\_\_\_

*Write in project name*

I would like to volunteer!

In the Fruit Garden

On sampling and field days

By doing work that can be done from my home

Name

Address

City

State/Province

Zip/Postal Code

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Email Address

Phone

Please make my gift:  In Honor of:  In Memory of:  
(Name of person) \_\_\_\_\_

Address of person or person's family so we can notify them:

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Thank you. Please send to:

WWFRF  
C/O John Valentine, Membership  
811 North 1 st  
Tacoma, WA 98403-2013