



Please mail or fax to:  
Ronald McDonald House of Dallas  
Attn: Allison Vanderwoude  
4707 Bengal Street,  
Dallas, Texas 75235

Fax: 214-631-1527  
Phone: 214-631-7354

Thank you for considering Ronald McDonald House of Dallas for your donation dollars. We appreciate your generosity, which will change a child's life.

### \* Personal Information

Title: \_\_\_\_\_ Name: \_\_\_\_\_ Company: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### \* Donation Amount

How much would you like to donate?

- \$1,000
- \$500
- \$250
- \$100
- \$50
- Other \_\_\_\_\_

### \* Donation Type

Where would you like your donation credited?

- General
- Annual Fund
- Trains at NorthPark Sponsorship

### \* Additional Information

- I prefer to make this donation anonymously.
- Please send me information on how to include RMHD in my estate planning.
- I do not want to receive RMHD email updates.

### Tribute Information

This donation is in memory / tribute to:

Name: \_\_\_\_\_

Type: \_\_\_\_\_

- Memorial
- Honorarium
- For the anniversary of
- For the birth of
- For the marriage of
- In celebration of
- In special recognition of

Specific tribute description: \_\_\_\_\_

Please mail a letter on my behalf to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: Zip Code: \_\_\_\_\_

### \* Payment Information

Credit Card Type

- Mastercard
- Visa
- American Express

Cardholder's Name: \_\_\_\_\_

Card Number: \_\_\_\_\_

Security Code: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

How did you hear about RMHD? \_\_\_\_\_

### \* Required Information