



Please mail this form and your check to:
Cesar Chavez Foundation
Attn: Accounting
P.O. BOX 62
Keene, CA 93531

(Please PRINT all information clearly)

Date: _____ / _____ / _____

Enclosed is my check in the amount of : \$ _____
(Please make payable to the Cesar Chavez Foundation.)

Full Name: _____

Organization: _____

Address: _____

City/State/ZIP: _____

Phone Number: (_____) _____ - _____

E-Mail : _____

TYPE OF DONATION (please choose one):

General Donation

Education Fund

Specific Program: _____

Specific Location: _____

Gift in memory of: _____

We thank you for your support. Your contribution is tax-deductible.