



## Mail-in Donation Form

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

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

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

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Email address: \_\_\_\_\_

Phone: \_\_\_\_\_

Donation amount: \$ \_\_\_\_\_

Make my donation  
reoccurring

\$ \_\_\_\_\_

Monthly

Yearly

*Charged monthly on the  
date of your gift.*

*Charged annually on  
the date of your gift.*

MasterCard

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American Express

Credit card # \_\_\_\_\_

Exp. Date: \_\_\_\_\_

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

Signature: \_\_\_\_\_

**Please use my gift for: A Bududa Vocational Academy Sponsorship**

**Please make my gift:**

In memory of \_\_\_\_\_

In honor of \_\_\_\_\_

*Please mail this form with your donation to the address below corresponding to the Country you submit taxes in!*

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Charlotte NC 28203

1380 Queen St W  
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(984) 283-3621  
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