



Please accept my support for the White Mountain Aquatic Foundation

Name: _____

Primary Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: (____) _____

Email: _____

Enclosed is a check for \$ _____ to support the White Mountain Aquatic Foundation

\$ 5,000

\$ 500

Other \$ _____

\$ 2,500

\$ 250

I would like my donation

\$ 1,000

\$ 100

listed as "Anonymous"

White Mountain Aquatic Foundation Mission:

Dedicated to providing a multiple pool, fitness and aquatic center in the Mt. Washington Valley that will deliver aquatic education, recreation, safety, competition, fitness and rehabilitative programs.

White Mountain Aquatic Foundation is a 501 (c) (3) nonprofit. Contributions are tax- deductible. Donors receive no goods or services in exchange for their donations.

Please mail the completed form along with your donation in the enclosed preaddressed envelope.

Donations submitted may be in the form of cash, check or money order. If you wish to donate using a credit card, please visit our website at www.whitemountainaquatic.com where you may donate using PayPal's secure server. Click on the donate tab.

PO Box 767 • North Conway, NH 03860 • 603.733.5915 • www.WhiteMountainAquatic.com