

Mail-in Donation Form

Thank you for making a donation to ZERO and joining us in the fight to end prostate cancer! Your support allows us to continue to increase awareness of the disease, educate those suffering from it, test those at risk, fund new research, and help find a cure. Please mail in your donation with this form to:

515 King Street, Suite 420
Alexandria, VA 22314

DONATION INFORMATION

Amount:

- \$35
- \$65
- \$100
- \$250
- \$500
- \$1,000
- OTHER: _____

Type of gift:

- One-time gift
- I want to help a man every month

Honor or Memorial Gift:

Honoree First Name: _____

Honoree Last Name: _____

Description: _____

Mail letter on my behalf to:

Name: _____

Address: _____

Honor Gift Type:

- In Honor of
- In Memory of

DONOR INFORMATION

First Name: _____

Last Name: _____

Address: _____

Email: _____

Phone: _____

Do you want to get more involved with ZERO?

- Yes
- No
- Maybe