

## **General Donation Form**

Sauk County Humane Society 618 Linn St. Baraboo, WI 53913 Phone: 608-356-2520; Fax: 608-356-2519

www.saukhumane.org shelter@saukhumane.org License #: 266752-DS

## Ways you can help the Sauk County Humane Society help the animals.....

Every year the Sauk County Humane Society provides shelter for over 2,000 animals and also provides many other important pet-related services to our community. Visit our website or our Facebook page to learn more about our services. We need your help to continue to care for all of our guests; over 60% of our operating budget must come from donations, memorials, memberships, fund-raising, and adoption fees.

<ul><li>Become a Member:</li></ul>				
[]\$10 Senior []\$20 Individual []\$	25 Family [ ] \$50 Business		\$	
• Kennel Sponsorship: As a kennel spo This sponsorship is good for one year	nsor you will have a plaque mounted on and must be renewed each year. [ ] \$100			
Name you would like on the plaque:				
• Memorial Plaques: Have the name an	d/or photo of your remembered person	or companion animal on	display in	
the shelter lobby. Please submit a photo that you would like used. [ ] \$100\$				
Name you would like on the plaque: _				
• General Donations: Choose from the	ollowing funds in the area in which you	would like to help.		
[] <b>General Shelter Fund:</b> This helps w	herever most needed		\$	
[] Betsy's Fund: Provides acute medical care for shelter animals			\$	
[] <b>Josh Diehm Fund:</b> Provides financia	al help for qualifying individuals to assist	for emergency vet care		
for their pet			\$	
[] Low Cost Spay/Neuter Program:\$				
• Memorial/In Honor Of Program: Dona	ate in memory of or in honor of a person	ı or a pet.		
[] In memory / honor (please circle or	ne)		\$	
[ ] Person (M / F) Name:				
[ ] Pet (M / F) Name:		_		
Your Name:		Phone:		
Address:				
Email:				
Please fill out the following if this is a gift	or if you would like a card sent out not	ifying that a donation ha	s been made in their name	
Name:				
Address:	City:	State:	Zip:	
Include a message (optional):				
Office Use Only: Date Received:	CASH / CHECK # / Bank I	Name:	/ CREDIT : MC / VS / DSCV	
Received By: TY: Notifica	tion: E TAP:			