



Donation Card

Name(s): _____

Address: _____

Phone: _____ E-mail: _____

I/We pledge a gift of \$_____. I have enclosed a check

*P.O. Box 29332, Greensboro, NC 27429 • 336-691-0051 • www.friendswithflowers.org
Friends with Flowers is a 501(C3) non-profit. All donations are tax deductible.*

My donation is in honor of:

My donation is in memory of:

Please send remembrance cards to:

Address: _____

City: _____

State: _____ Zip: _____