

Friends of Garfield Park 2017 Donation Form

Thank you for making a 2017 tax deductible gift to Friends of Garfield Park. Your gift helps support programming, preservation and maintenance of the oldest park in Indianapolis.



Gift Designation

- \$500 Lawton Brigade** Annual report and park signage recognition • (4) tickets to Music in the Gardens & Friends Reception on June 1 • (4) VIP tickets to an Evening for SoIndy on September 3
- \$250 League of Kessler** Annual report and park signage recognition • (2) tickets to Music in the Gardens & Friends Reception on June 1 • (2) VIP tickets to an Evening for SoIndy on September 3
- \$100 Commemorative Brick** Support the ongoing efforts to maintain the Sunken Garden and Conservatory. Your commemorative brick will be placed in the public plaza between the Conservatory and Sunken Garden. Please provide your brick engraving preferences below.
- \$50 Membership** Invitations to all Friends of Garfield Park events, (2) tickets to Music in the Gardens & Friends Reception on June 1
- \$1,000 Garfield Alive Partner** Annual report recognition • Garfield Alive tour recognition on the mobile app and recorded tour copy • (4) tickets to Music in Gardens & Friends reception on June 1 • (10) VIP tickets to an Evening for SOIndy on September 3 • (2) tickets to the Rockin Garfield Holiday Bash on December 2
- \$3,000 STARS Partner** Annual report, website and park signage recognition as a summer youth sports and arts program sponsor • (8) tickets to Music in the Gardens & Friends reception on June 1 • (20) VIP tickets to an Evening for SOIndy on September 3 • Table of (8) to the Rockin Garfield Holiday Bash on December 2
- \$ _____** Other gift amount.

Giving Method

This commitment will be paid to Friends of Garfield Park in the following manner:

One-time gift in the amount of \$ _____

Monthly gift. Please charge my credit card \$ _____ per month

Payment Method

- Personal check enclosed made payable to Friends of Garfield Park** (For one-time gifts)
- Credit card** (For either one-time gifts or ongoing monthly gifts)

Card number # Visa Mastercard American Express Discover

Expiration date (MM/YY)

CSC

Matching Gifts

My employer has a matching gift program _____
Company name

Donor Information

Please acknowledge this gift in the following way:

Donor Name(s) as you wish them to appear _____

Gift Acknowledgment Address _____

City _____ State _____ ZIP _____

Preferred Phone _____

Preferred Email _____

This gift is in memory or in honor of

Name(s) as you wish them to appear _____

Commemorative Brick Engraving

Maximum of 3 lines and a maximum of 16 characters per line (commas spaces and text count as a character).

Line 1: _____

Line 2: _____

Line 3: _____

Mail or fax your completed donation form to:
Friends of Garfield Park, Inc.
P.O. Box 33002
Indianapolis, IN 46203
Fax: 317-789-0578
Phone: 317-954-6361
info@garfieldparkindy.org
Give online at garfieldparkindy.org