

Dayspring Center's Mail Donation Form

Your gift from the heart allows us to be a vital source of hope and encouragement for local homeless families and their children. Please help fragile families overcome their homelessness and give what you can today.



Please print and complete this form and mail with your donation to:

Dayspring Center
P.O. Box 44105
Indianapolis, IN 46244

Name _____
Address _____
City _____ State _____ Zip _____
Phone _____
Email _____

Please make my donation:

In memory of _____
In honor of _____
Address of honoree _____

All honorees will receive a special, personalized letter acknowledging your donation.

Donation Method:

My check is enclosed for: \$ _____ *(Please make payable to Dayspring Center)*

You may charge my gift of: \$ _____ to my credit card: Visa MasterCard

Please schedule my recurring gift of \$ _____: Monthly Quarterly Bi-annual

Card Number _____ Exp. Date _____

Signature _____

THANK YOU. Your tax-deductible gift will bring hope to local homeless families with children. We deeply appreciate your support.