MAKE A SPECIAL CONTRIBUTION TO AHHA

Use this form if...

- You are not currently an AHHA member and wish to make a special contribution without becoming a member.
- You are currently an AHHA member and wish to make an additional contribution.

PLEASE TYPE OR PRINT CLEARLY

GENERAL CONFIDENTIAL INFORMATION:			ASSOCIATION	
Full Name:Organization: Street Address:				The Free and Impartial Wellness Resource Connecting You to the Power of Choice
City:			Country:	_
Work Phone:			Cell Phone:	_
Email:	Website:			_
This contribution is from \Box an individual				
CONTRIBUTION INFORMATION:				
AHHA is a designated 501(C)(3) - Tax ID# 33-041271		-041271 C	ontributions are tax deductible as allowed b	y law
I support AHHA with this special contribution	ition			<u> </u>

SPECIAL NOTES:

You may designate this special, non-membership contribution towards a specific AHHA project or donate in honor of or in memory of a special person. Use this space to explain your wishes and provide AHHA any details.

SUBMITTAL OPTIONS:

□ Check □ Money Order

Return completed application and membership contribution to: AHHA • PO Box 17400 • Anaheim, CA 92817-7400 Refer questions to 714.779.6152 • ahha.org • mail@ahha.org [If you wish to pay by credit card, use the online option]