



DONATION FORM

Contribution Levels

- | | |
|----------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Contributor: Up to \$1,499 | <input type="checkbox"/> Donor: \$1500 - \$4,999 |
| <input type="checkbox"/> Patron: \$5000 - \$9,999 | <input type="checkbox"/> Grand Patron: \$10,000 - \$24,999 |
| <input type="checkbox"/> Benefactor: \$25,000 - \$49,999 | <input type="checkbox"/> Grand Benefactor: \$50,000 + |

Are you interested in setting up a monthly donation?

- Yes, please ask HTCI's treasurer to contact me and setup a monthly plan
 No

(Please PRINT the complete information)

Last Name _____

First Name _____ Spouse _____

Address _____

City _____ State _____ Zip _____

Phone _____ Cell _____

E-mail _____

Enclosed is my donation/pledge of \$ _____ (payable by _____).

This donation/pledge is dedicated to _____

Please attach this form with your generous check payable to: **Hindu Temple of Central Indiana**

Please mail the check along with this form to:

Rama Ivaturi, HTCI Treasurer, 3350 N. German Church Road, Indianapolis, IN 46235
Phone: 317-891-9199 Website: www.htci.org