

HUMANE PARTNERS MEMBERSHIP

Payment Information

WANT TO GIVE MONTHLY?

YES! I choose to support the Arizona Humane Society.

Please accept my monthly gift of:

(minimum \$84)

- \$84/mo
- \$105/mo
- \$124/mo
- Other: \$ _____
- Payment by credit card
- Payment by check enclosed
(Please make payable to "Arizona Humane Society")

START CHARGING ON _____/_____/_____

- Visa
- American Express
- Mastercard
- Discover

NAME AS IT APPEARS ON CARD

CARD NUMBER

EXPIRATION DATE CVV

- Please send me additional information about Bequest/Deferred Gifts

**DONATE ANNUALLY AT
[AZHUMANE.ORG/HUMANEPARTNERS](https://azhumane.org/humanepartners)**

Thank You!



**humane
partners**

ARIZONA HUMANE SOCIETY

HUMANE PARTNERS MEMBERSHIP

Enrollee Form

CONTACT INFORMATION

NAME(S) _____

ADDRESS _____

CITY _____ STATE _____

ZIP _____ EMAIL _____

HOME PHONE _____

CELL PHONE _____

Please print name(s) as you wish to be recognized:
(with your spouse, partner, nickname, family foundation, etc.)

- I/we prefer to remain anonymous. Please do not list my/our names on any donor acknowledgement listings or printed materials.
- I decline membership in Humane Partners, but would like to provide a financial gift.

See next side for Payment Information.

