HAMBIDGE

Donor Information

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Plea	se indicate if you would like your gift to be in honor or in memorial of someone:
-	ou would like us to notify the honoree - or a member of their family - of your donation, write their name email or mailing address:
	e your name as you would like to be publicly acknowledged (You may include your spouse, honorifics, etc.) ne
Ple	Keep my gift anonymous Your information above will be kept on file for tax purposes but will not be shared. ase indicate how you would like your 100% tax deductible gift to support Hambidge
	Hambidge 2.0 Capital Campaign
	General Operating Fund to cover costs associated with the residency program
the	Sponsor a Distinguished Fellowship at \$3700 to provide two weeks of a paid residency and \$700 stipend to resident to offset personal expenses. Naming opportunities available.
	Sponsor a Two-Week Residency at \$3000 to cover all costs for a selected resident for a two-week stay at mbidge.
☐ Hai	Sponsor a One-Week Residency at \$1500 to cover all costs for a selected resident for a one-week stay at mbidge.
	Land Conservation to support Hambidge's environmental preservation programs.
	Happy Trails Fund to support the development and maintenance of hiking trails.
WOI	Anagama Program to support the expansion and improvement of the Anagama Kiln and educational ekshops on its use and application.

Your payment details will be used only for transactions related to the gift details provided.				
☐ Visa/M.C Card	☐ Amex			
Card Number				
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Printed Name				
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☐ Check enclosed				
Send check and this do	nation form to:			
Hambidge P.O. Box 339 Rabun Gap, GA 30568				

Payment Details

Thank you for supporting Hambidge!

You may also donate by calling 706-746-7324.