



**The Horticultural Alliance of the Hamptons
2021 Non-Event Preview Party & Garden Fair
DONOR FORM**



Please return this form with your payment information in the enclosed envelope.

Name _____

Mailing Address _____

Business Name _____

Mailing Address _____

Telephone _____ **Email** _____

I will NOT attend but I will contribute:

- \$1,000 - Underwriter • \$500 - Benefactor
 \$250 - Sponsor • \$150 - Patron • \$100 - Admirer
 \$50 - Loyal Supporter

Payment Options:

Check: \$ _____ Please make checks payable to: The Horticultural Alliance of the Hamptons
Mail to: P. O. Box 202, Bridgehampton, NY 11932

Credit Card: \$ _____ Please print your credit card information below.

Pay Online: <https://hahgarden.org/2021-HAH-Non-Event/>

Name (on card): _____

Billing address: _____ **City:** _____ **Zip code:** _____

Card Number: _____ **CVV Code:** _____ **Expiration Date:** _____

Signature: _____

THANK YOU FOR YOUR VERY GENEROUS SUPPORT