

CREDIT CARD AUTHORIZATION
DONATION



Name as it appears on card _____

Billing Address _____

City, State, Zip _____

Phone _____ Email _____

Card Type Visa
 Mastercard
 Discover
 American Express

Card Number _____ Exp ____/____ CVV _____

I authorize a one-time donation of \$ _____

I authorize a monthly donation \$ _____

NOTE: This authorization for a monthly donation will automatically stop at the end of the year. Renewals will be sent

Signature _____

Thank You! Baja Animal Sanctuary is a 501(c)3 non-profit corporation qualified to receive tax-deductible contributions and is funded solely by generous individuals like you.

Please email completed form or to request a mailing address to bajadogs1997@gmail.com