Please print this form, fill out, and mail to:

International Fund for Animal Welfare
290 Summer Street
Yarmouth Port, MA 02675

Yes! I will help IFAW continue its work to protect animals, people, and the place we call home.

Enclosed is my gift of:

____$100 ____$50 ____$25 ____$15 Other $____

NAME_____

BILLING ADDRESS_____

CITY_____ STATE_____

POSTCODE_____ COUNTRY_____

PHONE*_____ E-MAIL_____
*Should we have problems or questions in processing your donation.

[ ] Check enclosed

[ ] Please charge my:

☐ MasterCard ☐ VISA ☐ American Express ☐ Discover

No. | | | | | | | | | | | | | | | |

☐ Make my donation a monthly reoccurring gift.

Amount: $_____ Expiration Date: _____

Signature:_____ Date: _____

Code: UONDX220001001

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