



Memorials – Tributes – Celebrations
Honor / Remember a friend or family member.
Celebrate a birthday, anniversary, holiday.

In Honor of _____
Message _____

In Memory of _____
Message _____

Celebrating the _____
of _____
Message _____

CONTRIBUTOR:

Name: _____

Address: _____

City _____ State _____ Zip Code _____

Daytime Phone _____ Email Address _____

SEND RECOGNITION TO:

Name _____

Address _____

City _____ State _____ Zip Code _____

Amount of Contribution: \$ _____

Attach check payable to USARC or complete Credit Card info below:

CC# _____

Card Type _____ Expiration _____

Authorized Signature _____

Please return this Form to USARC by Fax or Mail:

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