



DONATE TO TIP

Yes, I would like to donate to the Trauma Intervention Program of Merrimack Valley, so TIP can continue helping survivors of tragic events.

Name of Donor: _____

Company Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Email _____

- I wish to receive future correspondence
- I prefer to make my donations anonymously

Amount of Donation: \$ _____

- Adopt a Volunteer
- General Donation to TIP
- Gift in Memory of: _____

Send Acknowledgement to: _____

Address: _____

- Gift in Honor of: _____
- I would like information about remembering TIP in my will and making a bequest that provides income for life.
- Enclosed is my check -

Charge my : Visa Master Card Discover

Card Number _____

Billing Zip _____ CVV _____ EXP Date _____

Signature _____

TIP is a nonprofit, 501 (c)3 organization and donations are tax deductible.

**Make check payable to: TIP
Mail to: Trauma Intervention Program
PO Box 1924
Andover, MA 01810**

<https://www.tipmvofmass.org>