



California Garden Clubs, Inc.

Donation Form

Date: _____

Donor Name: _____

Address: _____
(Street or P.O. Box, City and Zip Code)

Telephone: _____ eMail: _____

Please apply my donation to any of the PROJECTS selected:

\$ _____ President's Project 2021-2023

\$ _____ CGCI Scholarship Fund
(direct donation; not Life Membership)

\$ _____ Anza-Borrego Desert State Park

\$ _____ Sempervirens Fund

\$ _____ Blue Star Memorials

\$ _____ Sempervirens/Big Basin Recovery Fund

\$ _____ Conejo Valley Botanic Garden

Please apply my donation to one or both of the ENDOWMENT FUNDS selected:

\$ _____ CGCI Endowment Fund

\$ _____ CGCI Scholarship Endowment Fund

\$ _____ Total amount enclosed

Check number: _____

Donations may be made in honor or in memory of family or friends.

In Honor of: _____

Address: _____

In Memory of: _____

Send acknowledgement to:

Name: _____

Address: _____

Make check payable to: CGCI
Mail with copy of this form to:
California Garden Clubs, Inc.
P.O. Box 823
San Fernando, CA 91341-0823