



# Natural Heritage Trust

## Donation Form

To donate by mail, please complete this form and return it to the Natural Heritage Trust at:  
625 Broadway, Albany, NY 12207

### Donor Information

Title: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address 1: \_\_\_\_\_  
Address 2: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_ ☐ Please send me email updates on the NHT  
☐ I wish to remain anonymous

### Gift Information

**PLEASE MAKE CHECKS PAYABLE TO THE NATURAL HERITAGE TRUST**

Gift Amount: ☐ \$250 ☐ \$100 ☐ \$50 ☐ \$25 ☐ Other: \_\_\_\_\_

Designation: *(leave blank for general support)* \_\_\_\_\_

Payment Method: ☐ Visa ☐ MasterCard ☐ Discover ☐ American Express ☐ Check Enclosed

Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration: \_\_\_\_\_ CVC Code: \_\_\_\_\_

Billing Address: *(if different from mailing)* \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

*By signing this form, you authorize the NHT to process your gift with the payment method and amount indicated above*

### Tribute Information *(optional)*

This gift is made in: ☐ Honor ☐ Memory

Of: \_\_\_\_\_

Please send notification of this gift to: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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*The Natural Heritage Trust is 501(c)(3) not-for-profit organization. All gifts are fully tax-deductible. EIN: 16-1019635*