

**Crusaders For A Cure**  
Donation Form

Name of Donor \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Amount of Donation:    \$1       \$5       \$10       \$20       \$50       Other \_\_\_\_\_

Name of Honoree (if desired) \_\_\_\_\_

Each honoree will be displayed on a ribbon draped over a cross, depicting the importance of faith and the encouragement of family and friends in the battle against cancer.