

# YES! I want to make a donation to the House of Smiles! I support the World's Greatest Philanthropy!

Please fill out this form and return to:  
DAMASCUS SHRINE  
979 BAY ROAD WEBSTER, NY 14580-1736

Name \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_

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

E-mail \_\_\_\_\_

What I Would Like the Brick to Say (ex. Donated by the Smith Family):  
\_\_\_\_\_

My Donation is in the Amount of: \$ \_\_\_\_\_

To pay by Check, please make checks payable to the Damascus Shriners

To pay by credit card, please complete the following (print clearly):  MasterCard  VISA Card

#: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Exp. Date: \_\_\_\_ / \_\_\_\_      CVV/Security Code: \_\_\_\_\_

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

Signature \_\_\_\_\_