

## MD19 Lions - CARE



Gordon Smith Fellowship Application
Recognition is sent once donation and application are received and
processed at headquarters; please allow 5-6 weeks for delivery of award.
Please type or print to ensure accuracy.

4141 W. Maplewood Ave. • Bellingham, WA 98226 • Phone: (360) 733-4911 • www.lionsmd19.com •

1. Recipient
Is this a personal donation from the recipient?  Yes No
Name (exactly as it should appear on certificate):
Address:
Is the recipient a Lion? Yes ☐ No ☐
Club Name: District & Zone:
If Lion transferred from another club, enter previous club's name: Check if the recipient is deceased If deceased, print the name and address of the individual to whom the certificate is to be presented.
Name (exactly as it should appear on certificate):
Address:
2. Donor
Complete this portion only if the donor is different from the recipient (see box $\#1$ ). Donation made by (check one and complete): $\square$ Individual $\square$ Club $\square$ District $\square$ Other
Club Name:
District & Zone:
Is donor a Lion*?
Donor Address:
Note: If there is more than one donor, please attach a list of donors and the amount contributed by each.
3. Donation
Payable by (please check all that apply):
$\square$ Check/bank draft/money order payable to MD19 Lions CARE for \$500.00 US or Canadian Funds
☐ Use CARE funds donated between July 1 and June 30 of this current Lions year
Completion of an installment CARE Fellowship started between July 1 and June 30 of this Lions Year
4. Shipping Instructions
Print name, address, telephone number and email of individual to whom materials are to be sent. If no address is provided, recognition is sent to club president.
Name: Daytime Phone: Email:
Address:
F. Consider Instructions
5. Special Instructions