



Donation Form

Please mail completed form to:

Foundation of the CTCA Treasurer
Cynthia Schlaikjer
19 Hickory Hill Road
Manchester, MA 01944

I would like to help the Foundation of the Cairn Terrier Club of America fight medical diseases found in Cairn Terriers by making a tax-deductible gift today.

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip/Postal Code: _____

Country: _____

Telephone: _____ Email: _____

Please find my check enclosed, payable to "Foundation of the Cairn Terrier Club of America" in the amount of \$_____.

Credit Card Information:

Name on Card: _____

Type of Credit Card: _____

Credit Card Number: _____

Expiration Date: _____ Security Code: _____
(MM/YY) (3-4 digits)