

Membership and Gifts Form

For mail or fax

Yes! I would like to support the work of the FSH Society!

__ I would like to make a gift in the amount of \$ _____

__ My company would like to match my gift. I have enclosed the matching gift form.

__ Make this a monthly recurring gift. __ My gift is anonymous

Please use my gift __ where most needed; __ for research and education only

My gift is in support of or in honor of: _____

Please notify the following individual(s) of my tribute gift (provide name and address):

Name(s): _____

Address: _____

City, State, Zip: _____

Phone: () _____ Email: _____

__ I have enclosed a check payable to the *FSH Society*.

__ I would like to pay by credit card:

VISA

Mastercard

American Express

Discover

Credit Card # _____ Expiration Date: _____

Signature: _____

Name on the Card: _____

Please mail or fax this form to:

FSH Society
450 Bedford Street
Lexington, MA 02420 USA

Fax: (781) 862-1116



The Facioscapulohumeral (FSH) Society is an independent 501(c)(3) non-profit and tax-exempt U.S. corporation organized to address issues and needs specifically related to Facioscapulohumeral Muscular Dystrophy (FSHD). Contributions are acknowledged for tax purposes.