




Your gift is needed to make our Garden spring to life!

You can support the Riverside International Friendship Gardens with:

 **A financial gift** – This is a grand way to express your appreciation and support of horticulture, ecological education, and the beauty of nature, worldwide. You may want to consider a memorial to pay tribute to a loved one. Your gift is tax deductible.

 **Your time** – Another pair of hands will always be welcome in the gardens. It's a wonderful educational opportunity and a great way to develop friendships with others who have similar interests!

 **In-kind donations** – The gardens will also need in-kind donations. Please contact us at the number below to discuss items or professional services you may be willing to donate.

Create a lasting memory with the gift of an inscribed brick, which will be placed in one of the Garden's many walkways.

Your brick may include your name or that of a loved one, family, business, organization or pay tribute to the memory of someone special.

Please print inscription below; one character per box. Inscription requests are subject to final approval of the Riverside International Friendship Gardens' Board of Directors.

Check desired brick size:

- | | | | |
|--------------------------|------------------|-----------|-------|
| <input type="checkbox"/> | Single | 4" x 8" | \$100 |
| <input type="checkbox"/> | Double | 8" x 8" | \$250 |
| <input type="checkbox"/> | Granite | 12' x 12" | \$500 |
| <input type="checkbox"/> | Add Company Logo | | \$100 |



Yes, I want to help create the Riverside International Friendship Gardens

Donation \$ _____

Method of Payment:

____ **Check** (Please make check payable to Riverside International
Friendship Gardens, Inc.)

____ **Credit Card**

Type: MasterCard VISA

Expiration Date ____ / ____

CVV Code ____ ____ ____ (3 digit number on the back
of the credit card)

By signing, I agree to pay the above total amount
according to the Card Issuer Agreement.

Cardholder Signature

____ **Bill Me**

Donor Information:

Name _____

(As you would like it to appear on recognition materials)

Address _____

City/State/Zip _____

Telephone _____

E-mail _____

Complete information above and return with check
or money order enclosed to:

Riverside International Friendship Gardens

P.O. Box 3473

La Crosse, WI 54602-3473



**RIVERSIDE
INTERNATIONAL
FRIENDSHIP GARDENS**



(608) 791-GROW

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