

Winners Federation

Healthy workers for healthy horses.

Yes, I want to get involved in the Winners Federation.

___ Current gift of \$_____

___ Three-Year Giving Pledge of \$_____ per year, for a total of \$_____.

___ Gift of assets. Please contact me.

___ Bequest. Please contact me.

Name _____

Address _____

City _____ State _____ Zip _____

Daytime Phone _____ Evening Phone _____

Organization _____

Payment (Please do not send cash.)

_____ Check

_____ Credit Card

___ Visa ___ Mastercard ___ Discover

Credit card number _____

Expiration Date _____ (MM/YY)

**Send to: G. Wesley Jones, LCSW
777 Delaware Park Blvd
Wilmington, DE 19084
Attn: Horsemens Office**