

# Online Donation Form



1705 W. Clinch Avenue • Knoxville, TN 37916  
(865) 637-7475 – (865) 525-7942 fax  
www.knoxrmhc.org

Please fill out this form completely and mail or fax it back to the address above.

**I would like to make a gift to the Ronald McDonald House in the amount of: \$ \_\_\_\_\_**

Donor Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

*Please make your check payable to Ronald McDonald House.  
You will receive a receipt for your tax-deductible gift.*

Visa    Mastercard    American Express    Check # \_\_\_\_\_

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

My gift is:

*In memory of* \_\_\_\_\_

*In honor of* \_\_\_\_\_

*For the special occasion* \_\_\_\_\_

Birthday, Anniversary, Holiday, etc.

Please send acknowledgement of this gift to:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Please sign the card from \_\_\_\_\_

On behalf of the families that call our House, *home*, please accept our sincere appreciation for your gift.