



Please print, complete and mail your contribution to:  
USMS  
Swimming Saves Lives Foundation  
Attention: Susan Kuhlman  
1751 Mound St., Ste. 201  
Sarasota, FL 34236

**CONTRIBUTION FORM**

\_\_\_\_\_  
First Name Last Name

\_\_\_\_\_  
Address City State Zip

\_\_\_\_\_  
Phone E-mail Address

*If paying by credit card please provide the following information:*

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It is my/our wish that this gift be recognized as follows:

In memory of (PLEASE PRINT) \_\_\_\_\_

OR

In honor of (PLEASE PRINT) \_\_\_\_\_

Name for Recognition letter \_\_\_\_\_

Address \_\_\_\_\_

City, St, Zip \_\_\_\_\_

Sincerely,

\_\_\_\_\_  
SIGNATURE DATE

Please indicate exactly how you would like your name(s) to be listed in all USMS literature:

(Please print) \_\_\_\_\_

I/We wish to remain anonymous

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