

# WHPC DONATION FORM

Show Name:

**MotorMouth Radio**

Listener Name: \_\_\_\_\_

Listener Address: \_\_\_\_\_

Listener Town: \_\_\_\_\_

Zip: \_\_\_\_\_

Listener Home Phone: \_\_\_\_\_

Listener Cell Phone: \_\_\_\_\_

Listener E-Mail: \_\_\_\_\_

AMOUNT OF DONATION: \_\_\_\_\_

PAYMENT:

CHECK - WE WILL SEND AN ADDRESSED ENVELOPE WITH INSTRUCTIONS

CREDIT CARD:

VISA

MASTERCARD

AMEX

DISCOVER

CARD# \_\_\_\_\_

NAME ON CARD: \_\_\_\_\_

CARD EXPIRATION: \_\_\_\_ / \_\_\_\_

CARD SECURITY CODE ON BACK: \_\_\_\_\_

Prize Won (if any): \_\_\_\_\_

Staff Name: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_