

INFORMATION FOR DONATION CHECK *(Please print and mail to ESRA at the address below)*

Your full name _____

Your full mailing address _____

Your email _____ Your phone number _____

Any special instructions or comments? _____

Check amount (\$USD) _____

Earmark Your Donation (check one):

- All Springers in ESRA care
- Special Needs Springer - Name: _____ Intake number: _____

Charlotte's Senior Fund

Jan Flagg Memorial Fund

Memorial or Tribute - Name: _____ *Please include details associated with memorial or honorary donations, including those ESRA should notify of the donation.* _____

- To earmark a donation for a specific dog that is not listed as a Special Needs Springer, please provide the name & the intake number (if known).

Name: _____ Intake Number: _____

Enclose your check with this form and mail to

English Springer Rescue America, Inc.
1025 Rose Creek Drive, Suite 620-305
Woodstock, GA 30189