



# LIFE ROLLS ON™ FOUNDATION

Life Rolls On is a non-profit 501(c)3 Foundation that exists to be a grassroots resource and an advocate on behalf of young people who have sustained a spinal cord injury (SCI). Life Rolls On - Instilling in people that life with SCI does indeed roll on.

## Thank you for your contribution!

### Donor Information

First Name\*: \_\_\_\_\_ Last Name\*: \_\_\_\_\_

Company Name: \_\_\_\_\_

Email Address\*: \_\_\_\_\_

Address Line 1\*: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City\*: \_\_\_\_\_ State\*: \_\_\_\_\_ Zip\*: \_\_\_\_\_

Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Donation Amount\*: \$ \_\_\_\_\_ Payment Method (circle one): Check / Cash / Credit Card)

Credit Card Type\* (circle one):    

Cardholder's Name\*: \_\_\_\_\_

Credit Card Numbers\*: \_\_\_\_\_ Expiration\*: \_\_\_\_\_

### Billing Information

If the billing information\* is the same as the contact information check this box.  
If not please fill out the information below:

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

X \_\_\_\_\_  
(Signature of cardholder) (Date)

By signing I certify that I am the cardholder, and authorize the Life Rolls On Foundation to use the above named credit card number for donation by the above named individual/company.

- Required

**If you are enclosing a check, please mail the completed form to:  
Life Rolls On Foundation 7770 Regents Road #113-199, San Diego, CA 92122  
(If using a credit card, you can fax to (619) 374-7055 or mail to the above address)**