



Donor Information Form

I have enclosed my contribution of \$_____ to help STRIDE realize its goals.

I am interested in: Volunteering Rider Enrollment Donating Equipment

Donating a Horse Providing Pro-Bono Services Additional Information

Name: _____

Mailing Address: _____

Contact Phone: _____ Home Office Cell

Best Time to Call: Morning Afternoon Evening

We may periodically publish a list of businesses and individuals who contribute funds to STRIDE on our website, newsletters, or other publications. Would you like your name to be included in future listings?

Yes, you may publish my name. No, I wish to remain anonymous.

Please provide any comments or additional information you wish to share with us in the space below:

*Make checks payable to STRIDE and mail to:
P.O. Box 671828 ~ Chugiak, AK 99567-1828*

All donations are tax deductible to the extent allowable by law. EIN: 92-0153292