

The NSCAA Foundation Campaign *Donate now!*

Mailing /Billing Address

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Street Address _____

City _____ State _____ Zip _____

Phone _____

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- Enclosed is my check made payable to:
NSCAA Foundation

- Please charge my credit card
 MasterCard Visa AMEX Discover

Name as it appears on card _____

Credit Card # _____ Expiration _____

Signature _____

- Apply my donation to unrestricted operating support.
 Apply my donation to the _____ fund.
 Apply my donation to the general endowment.

Please mail this reply card and your donation to:
NSCAA Foundation
800 Ann Avenue
Kansas City, KS 66101

Thank you!

