



Thank you for choosing to be a Champion in Mentis' Circle of Champions!

To enroll in the Circle of Champions giving club, please complete this form and mail it along with your donation to: **Mentis, 709 Franklin St., Napa, CA 94559**. Be sure to enclose your check or credit card information.

Yes! I want to participate in the Circle of Champions annual giving club!

Name: _____
Address: _____

City: _____
State: _____ Zip: _____
Daytime Phone: _____
E-mail Address: _____

I will make a gift by (select method and amount below):

CREDIT CARD

By selecting this box, I authorize Mentis to charge my Circle of Champions donation in the amount indicated below, to my credit card.

Amount: \$ _____

Visa _____ MasterCard _____ American Express _____ Discover _____

Credit Card Number: _____ - _____ - _____ - _____ CVV/CVC Code: _____

Expiration Date (MM/YYYY): _____ - _____ Billing Zip Code: _____

Name (as it appears on card): _____

Signature – **Required**: _____ Date: _____

(Credit Card transactions will be processed through Square.) Your statement will indicate a transaction with Mentis.

CHECK ENCLOSED

Amount: \$ _____

I'M INTERESTED IN VOLUNTEERING

PLEASE CALL ME ABOUT OTHER WAYS TO GIVE TO MENTIS

Mentis is a 501(c)(3) nonprofit organization. Federal Tax ID 94-1236934.

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