



# DONATION FORM

Donor Name/Business: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Amount: \$ \_\_\_\_\_ Other: \_\_\_\_\_

What type of donation is this?  Friend of 9B Trails  Workplace Giving

Memorial Contribution: \_\_\_\_\_

Which trail you would like to see your donation go towards:

*Enchanted Forest*  *Riverside Park Trail System*  *No Preference*

Do you want to join our email list?  yes  no

Please Mail Check to:

**9B Trails, Inc.  
PO Box 1764  
Bonners Ferry, ID 83805**

*9B Trails is a 501(c)(3) Nonprofit Organization. EIN# 82-4094576.  
Contributions to 9B Trails are Tax-Deductible.*