

Melvin Jones Fellowship Application



Lions Clubs International
FOUNDATION

Individual Completing this Form

Name _____ Date _____

E-mail _____ Phone _____

1. Area of Giving

Please check one

☐ Empowering Service Fund

☐ Disaster Relief Fund

(Each choice above is eligible for MJF credit)

☐ Other _____

(May not be eligible for MJF credit)

MJF Credits to be used from previous donation:

*Please Note – This section should only be used if sufficient funds have already been deposited with Lions Clubs International Foundation

Use Credits From: _____

ID#: _____

2. Contribution Details

Donor Name (individual, club, company, foundation) _____

Donor ID _____

Donor Club _____

Donor District _____

Amount of Contribution _____

☐ Full Payment ☐ Installment ☐ Final Installment

Donors making personal donations towards MJF also receive credit as a Lions Share Program Member. The Lions Share Program recognizes three levels of support: US\$50 (One star) US\$100 (Two stars) US\$200 (Three stars).

☐ Yes! In addition to receiving MJF credit, I would like to receive a Lions Share Pin for my donation.

Gift Type

Make donations via the web at www.lionsclubs.org

☐ US\$ Check Enclosed (payable to LCIF; drawn on US bank)

☐ Wire/Bank Transfer (Please attach bank transfer receipt)

☐ Local LCI Deposit (Please attach bank deposit ticket)

☐ Cash (Mail donations along with the Donor Contribution Form to address provided)

THE FOUNDATION USES A LOCK BOX SERVICE TO RECEIVE AND PROCESS ALL DONATIONS.

3. Recipient of Recognition (Individual person)

Type of recognition requested (please check one) Fellowships cannot be presented to businesses or organizations

☐ MJF ☐ PMJF ☐ To Be Named Later

☐ Memorial Plaque in memory of deceased

Recipient Name (Exactly as it is to be engraved on plaque) _____

Recipient ID# (if applicable) _____

Recipient Name _____

Address _____

City _____ State/Province _____

Country _____ Postal Code _____

Club of Recipient _____

Club # _____ District _____

For Memorial List name of MJF surviving family member to whom Memorial plaque will be given. (Needed for recognition letter which accompanies plaque.) _____

4. Shipping Information

PLEASE NOTE: MATERIALS CANNOT BE SENT TO PO BOXES.

Ship to Member ID # (if applicable) _____

Name _____

Address _____

City _____ State/Province _____

Country _____ Postal Code _____

E-mail _____ Phone _____

Recognition is sent once donation and application are received and processed at headquarters. Please allow a minimum of 15 days in the U.S. and 30 days elsewhere for shipping.

Special Instructions/Notes _____

Lions Clubs International Foundation
Department 4547
Carol Stream, IL 60122-4547
USA

Tel: 630-203-3836

Web site: www.lionsclubs.org

E-mail: donorassistance@lionsclubs.org