

Donation Form



Independence Again

Independence Again is dedicated to provide a safe, stable, sober living environment for those individuals who are seeking a healthy and happy life without the use of drugs and alcohol.

Donor Information (please print or type)

Name _____
Billing address _____
City, ST Zip Code _____
Phone 1/Phone2 _____
Fax | Email _____

Pledge Information

I (we) pledge a total of \$_____ to be paid: now monthly quarterly yearly.

I (we) plan to make this contribution in the form of: cash check credit card other.

Credit card type |
Exp. date _____

Credit card number _____

Authorized signature _____

Gift will be matched by (company/family/foundation) _____

form enclosed form will be forwarded

Acknowledgement Information

Please use the following name(s) in all acknowledgements: _____

I (we) wish to have our gift remain anonymous.

Signature(s)

Please make checks, corporate matches,
or other gifts payable to:

Date

Independence Again
2435 Oak Park Drive
Cookeville, TN 38506

Independence Again North
2435 Oak Park Drive
Cookeville, TN 38506
931-510-9775

Independence Again West
224 Garrett Avenue
Cookeville, TN 38501
931-933-5914

Independence Again Central
255 Kacie Avenue
Cookeville, TN 38501
931-933-5903