



American
Association
for the
**History of
Nursing, Inc.**

AAHN Endowments Gift Form

The American Association for the History of Nursing accepts gifts in memory of someone who has died or in honor of someone on a special occasion such as a birthday, anniversary or graduation. Or you can give a gift just to say *Thank you*. We will send a notice to the person honored or the family of the deceased. **Unless otherwise specified, gifts will go to the Awards fund.**

Please complete and print out this form.

In Memory of / In Honor of Gift Form#

I am enclosing a special gift in the amount of \$_____

In Memory of _____

In Honor of _____

To celebrate his/her/their _____

Send acknowledgment of gift to:

Name _____

Address _____

City/State/Zip _____

Indicate that gift is being made by:

Your name: _____

Address: _____

City/State/Zip _____

Payment Information:

Name on Card: _____ Address: _____

City/State/Zip: _____

Signature: _____

Card Number: _____ Exp. Date: _____ 3 Digit CVV Code: _____

Type of Card: Visa _____ MasterCard _____ AMEX _____ Discover _____

Credit Card Payments may be faxed to AAHN at 303-422-8894

Please send this form with payment information or check payable to **AAHN** to:

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