



5 Salt Marsh Way, Cape Elizabeth, ME 04107  
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(207)799-3005 (winter), (207)785-2400 (summer)

By making this tax-deductible contribution, you have made a significant difference in the lives of children who would not otherwise benefit from an ALC experience. That very positive difference lasts a lifetime.

Name(s) \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone \_\_\_\_\_ Email: \_\_\_\_\_

- ☐ Alumni; name as camper/counselor \_\_\_\_\_ Year(s) at ALC: \_\_\_\_\_
- ☐ Parent; name of your camper: \_\_\_\_\_ Year(s) at ALC: \_\_\_\_\_
- ☐ Other \_\_\_\_\_  
(include connection/relationship to Alford Lake)

Leadership Gift Club:

- ☐ Blue Pine Tree: \$100-\$499
- ☐ Red Pine Tree: \$500-\$999
- ☐ Gold Pine Tree: \$1,000- \$2,499
- ☐ Green Pine Tree: \$2,500- \$4,999
- ☐ Pink Pine Tree \$5,000- \$9,999
- ☐ Purple Pine Tree \$10,000 or more

- ☐ My gift will be matched by my employer: \_\_\_\_\_
- ☐ I intend to make a gift of securities and will contact ALC for instructions.
- ☐ I intend to include ALC in my will or trust and will contact ALC for instructions.

Donations will appear in the annual *Blueberry Blue*

☐ I prefer to my gift to remain anonymous

- ☐ Enclosed is my check payable to "ACA/fbo Alford Lake Camp" in the amount of \$ \_\_\_\_\_

- ☐ Please charge my gift to:

Visa/MC # \_\_\_\_\_

Exp. Date \_\_\_\_\_ CVV Code \_\_\_\_\_ Amount \$ \_\_\_\_\_

Print Actual Name on the Card \_\_\_\_\_

Billing Address \_\_\_\_\_ Zip Code \_\_\_\_\_

Signature \_\_\_\_\_

Please print and return this form with your donation

*THANK YOU!*