

	FOU		AH	N		
"Comm throug	itted to empowe gh development	ering and al and h	d supportin umanitario	ng girls d In golf i	and wome ntiatives."	
Please count on my gift to help empower girls and women through the game of golf!						
	\$1,000 \$100 Other		\$500 \$50 —		\$250 \$25	
would I	ike to design LPGA-USGA golf develo (ages 7-17)	Girls (olf—the			
	5 c. 10 iai 5 i i p5					
	Unrestricted					
Payment	options: Enclosed is The LPGA For Please charged Master C	oundat ge my	tion	. ,	ble to:	
Account	#					
Expiratio	n Date					
Name (p	lease print a	s it app	ears on y	your ca	ard):	
Signatur	e					

My Name
Address
Phone
E-mail
I would like to make my gift:
☐ In Honor of: ☐ In Memory of:
Name
Occasion
If desired, an acknowledgement letter will be sent to the honoree or other designated person:
Name
Address
My employer will match my gift.
The matching gift form is:
☐ Enclosed ☐ Forthcoming
The LPGA Foundation is very grateful for your gift. Thank you!
The LPGA Foundation is a 501(c)(3) organization. Your gift is tax-deductible to the extent provided by law.



100 International Golf Drive Daytona Beach, Florida 32124.1082 Phone 386.274.6200 Fax 386.274.1099 www.lpga.com