



IES Brain Research Foundation Donation Form

Questions: Contact: 973 726-6218 or iesbrainresearch@gmail.com

**You can donate by credit card or PayPal on our website
www.iesbrainresearch.org or you can mail a check with this form**

I/We have enclosed a donation** in the amount of

☐ \$25 ☐ \$50 ☐ \$100 ☐ \$200 ☐ \$500 ☐ \$1000 Other \$ _____

Gifts at all levels are very much appreciated!!!!

☐ **I/We will sponsor 1 Summer Fellowship @ \$2500**

I/We want *a name attached to the fellowship ☐ Yes ☐ No

Indicate the exact name(s) _____

☐ **I/We will sponsor a Summer Fellowship each year for _____ years x \$2500 Total \$ _____**

I/We want *a name attached to the fellowship each year ☐ Yes ☐ No Indicate the exact name(s) and year for each fellowship. *Can be the same or different each year _____

☐ **I/We will sponsor (#) _____ Student Summer Fellowships @ \$2500 each Total \$ _____**

I/We want *a name attached to the fellowships ☐ Yes ☐ No

*Can be a different name attached to each fellowship each. Indicate the exact name(s) for each: _____

***Can be your name, business name or name of someone honored or remembered**

You can suggest the fellowships be earmarked for a specific disease or area of brain research (will honor when possible) _____

Donor's Name(s) _____

Address _____

City, State _____ **Zip** _____

Phone _____ **Fax** _____ **Cell** _____

Email _____

Signature _____ **Date** _____

If you would like a certificate sent in honor or memory, please include on the back: name and message you would like on the certificate, and name & address to whom it should be sent.

Thank you so much for your donation! A receipt will be sent to you.

Fill out & sign this form and send to:

IES Brain Research Foundation

5 Hickory Trail

Sparta, New Jersey 07871

Make checks payable to: IES Brain Research Foundation

Donations are tax deductible Tax Exempt 501c3 ID# 04-3779708