



## CONTRIBUTION FORM

I would like to make a contribution of \$\_\_\_\_\_ to MINDbasedHealing.

General Contribution

Contribute to creating more educational content

I would like to contribute to research in a particular disease.

Specific disease: \_\_\_\_\_

### CONTACT (if different than what is on the check)

Name: \_\_\_\_\_

Organization: \_\_\_\_\_

### BILLING ADDRESS (if different than what is written on the check):

Street: \_\_\_\_\_

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

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

### PAYMENT OPTIONS

#### Payment by Credit Card.

Please use the website donation page [www.mindbasedhealing.org/donate](http://www.mindbasedhealing.org/donate) or send by Paypal to [info@mindbasedhealing.org](mailto:info@mindbasedhealing.org). Specify in notes if this donation is for a particular disease or the education center.

#### Payment by Check

Make checks payable to MINDbasedHealing. All checks must be payable in US dollars and drawn on a US bank. To submit, mail this form to the address below.

#### Wire Transfer

For wire transfers, email us at [info@mindbasedhealing.org](mailto:info@mindbasedhealing.org) or call 416.699.2574 to obtain wire transfer information needed by your bank.

*On behalf of MINDbasedHealing's Board of Directors, educators and staff, we thank you for your generous support!*

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