



Tick-borne Infections Council of North Carolina, Inc
DONATION FORM

Please help us lessen the impact of tick-borne infections in NC and to assist us with our registry of persons affected by tick-borne infections.

Date _____

NAME _____

May print name publicly List as anonymous

Mailing Address _____

City _____ State _____ Zip _____

Phone _____

Email _____

Donation levels:

\$5-15 Individual _____ \$50 Sustaining _____

\$25 Family _____ \$100 TIC-NC Circle _____

Other \$ _____

We need your help! Are you interested in volunteering to help us with?

Data collection _____ Publicity _____ Fundraising _____

Data entry _____ Developing educational materials _____

Other _____

Please make check out to TIC-NC, Inc and mail to:

Tick-borne Infections Council of NC, Inc

PO Box 841

Pittsboro, NC 27312

919.542.5573 info@tic-nc.org www.tic-nc.org

TIC-NC, Inc is a 501(c)(3) non-profit organization.