

Lab Partner

Monthly Giving Program Enrollment Form



Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Preferred email address: _____

Preferred daytime phone: _____

(In case we have a problem with your credit card.)



Yes! I want to become a Lab Partner and make a monthly gift to help Seeding Labs' scientists discover the cures, develop the seeds, and design the technologies to solve many of our world's most complex problems. **I authorize Seeding Labs to charge the following amount to my credit/debit card each month.**

\$10 \$25 \$50 \$100 Other: \$_____ (\$10 minimum, please)

Credit/Debit Card Information*

Visa MasterCard American Express Discover

Card #: _____ Expiration Date: _____

Name on Card: _____ Security Code: _____

Signature: _____

* You are welcome to donate by check if this is a one-time gift.

Your gift to Seeding Labs is tax-deductible to the fullest extent of the law. Seeding Labs is a charitable tax-exempt organization under section 501(c)3 of the Internal Revenue Service Code. You will receive a gift receipt totaling your giving at the end of each calendar year. Your account billing statement will serve as a monthly receipt. You may cancel your Lab Partner membership at any time by notifying us in writing. Please return this form to the address below or become a Lab Partner online at donate.seedinglabs.org/labpartners