



DONATION FORM

Name _____
Address _____
Phone _____
Email _____

Your name(s) as you wish to be acknowledged Or ☐ I/We prefer to remain anonymous.

All contributions will be publicly acknowledged unless anonymous.

I would like my donation to be applied to:

- ☐ Where it's needed most ☐ Transformation Economy ☐ Community Regeneration
☐ Program Scholarship Fund ☐ Transcend 2050 Climate Initiative

Total Gift Amount \$ _____ ☐ I would like to donate this amount each month to be debited on the
5th or 20th (circle one) of every month

Please make contributions payable to the Transformational Travel Institute

Payment method: ☐ Check ☐ Visa/MC ☐ Stock ☐ Direct Debit (recurring gifts only)

Checking Routing No _____ Checking Account Number _____

Credit Card Number _____ Exp. Date _____

Signature: _____ Date _____

THIS GIFT IS OFFERED IN HONOR/MEMORY OF

_____ *If you would like this Honoree to be
acknowledged, please provide the contact information below:

Address _____ Phone Number _____

Please mail to: Transformational Travel Institute: 4114 13th Ave. S., Seattle, WA 98108, USA

**Your generosity is precious and appreciated. Thank you for supporting the development of wisdom,
compassion, and stewardship in the world through a more conscious approach to travel.**

All contributions are eligible for tax deduction as permitted by law. *Retain this letter for tax purposes. The gift is tax-deductible to the full extent allowed by law. No goods or services were provided to you in consideration of this contribution. 501(c)3 EIN 26-4490451*