



# MD19 Lions – CARE Gordon Smith Fellowship Application

*Recognition is sent once donation and application are received and processed at headquarters; please allow 5-6 weeks for delivery of award.  
Please type or print to ensure accuracy.*



**P.O. Box 66 • Bellingham, WA 98227 • Phone: (360) 733-4911 • www.lionsmd19.com • Md19lions@telebyte.com**

### 1. Recipient

Is this a personal donation from the recipient?      Yes  No

Name (exactly as it should appear on certificate): \_\_\_\_\_

Address: \_\_\_\_\_

Is the recipient a Lion? Yes  No

Club Name: \_\_\_\_\_ District & Zone: \_\_\_\_\_

If Lion transferred from another club, enter previous club's name: \_\_\_\_\_

Check if the recipient is deceased.      If deceased, print the name and address of the individual to whom the certificate is to be presented.

Name (exactly as it should appear on certificate): \_\_\_\_\_

Address: \_\_\_\_\_

### 2. Donor

Complete this portion only if the donor is different from the recipient (see box #1). Donation made by (check one and complete):  Individual  Club  District  Other

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

District & Zone: \_\_\_\_\_

Is donor a Lion\*?  Yes  No      Donor Name: \_\_\_\_\_

Donor Address: \_\_\_\_\_

**Note: If there is more than one donor, please attach a list of donors and the amount contributed by each.**

### 3. Donation

Payable by (please check all that apply):

- Check/bank draft/money order payable to MD19 Lions CARE for \$500.00
- Use CARE funds donated between July 1 and June 30 of this current Lions year
- Completion of an installment CARE Fellowship started between July 1 and June 30 of this Lions Year

### 4. Shipping Instructions

Print name, address, telephone number and email of individual to whom materials are to be sent. If no address is provided, recognition is sent to club president.

Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

### 5. Special Instructions

\_\_\_\_\_  
\_\_\_\_\_