

**Siddaganga Humanitarian Mission
185 Ivy Grove Ln.
Collierville. TN 38017 USA**

**<http://shmus.org>
siddaganga.mission@gmail.com**

DONOR FORM

NAME: _____

ADDRESS: _____

Phone: _____ **Email:** _____

Please establish an endowment to support one student permanently, in the Name(s) of: _____.

I/We have enclosed \$2500 for the same. (The names of donors will be displayed in the Dining Hall at Siddaganga Gurukula).

OR

I/We have enclosed \$ _____ to support _____ students for one year at the rate of \$ 250 per student.

OR

Please utilize our donation in the amount of \$ _____ (an amount of your choice) towards any of the immediate needs or towards general operation.

Donors may kindly send their contributions in the form of checks in the name of Siddaganga Humanitarian Mission to the above address. Also please send a message to siddaganga.mission@gmail.com.

For further information Please contact us at - siddaganga.mission@gmail.com