

C&O Canal Association Donation Form

Donor's Name(s) _____

Address _____

City, State, and Zip _____

Phone and/or e-mail (optional) _____

Donation amount _____

Fund to which donation is made:

_____ The Kenneth Rollins C&O Canal Fund

_____ The Davies Legal Defense Fund

Name of the person in whose memory the donation is made (if applicable):

Check here if you wish your donation to be anonymous _____

Please make your check payable to the C&O Canal Association and mail this completed form to:

C&O Canal Association
P. O. Box 366
Glen Echo MD 20812-0366