



# Holiday Card Order Form



Meals on Wheels of Greenville is pleased to offer holiday cards for your family, friends or business partners and clients this season. All proceeds support our mission to enhance the quality of life of homebound individuals by providing nutritious meals, personal interaction and independence. Thank you for your support!

## STEP 1: Select your card quantity.

**Inside of card:** "Spread light and joy this holiday season. This holiday greeting provides a hot meal and volunteer visit for a homebound individual in Greenville County."

Number of Cards: \_\_\_\_\_

## STEP 2: Select how you want the cards delivered & your donation amount.

**If you want the cards sent directly to your home address:**

The suggested donation is \$10 for each card.  The minimum donation is \$5 for each card.

**If you want Meals on Wheels to send the cards on your behalf:**

The suggested donation is \$20 for each card.  The minimum donation is \$10 for each card.

## STEP 3: Calculate your total.

Total # of cards (Step 1) \_\_\_\_\_ x \$ \_\_\_\_\_ donation per card (Step 2) = \$ \_\_\_\_\_

## STEP 4: Provide your contact & payment information.

Full name \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Payment:  Cash  Check  Money order  Credit card (record card information below)

Please charge my:  Visa  Master Card  AMEX  Discover

Card number \_\_\_\_\_ Exp. Date \_\_\_\_\_ CSC \_\_\_\_\_

Name on card \_\_\_\_\_

Billing street address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## STEP 5: Provide mailing information.

**A. ONLY if you're having the cards mailed directly to you, please provide your personal mailing address:**

Mailing address is the same as the billing address provided in Step 4.

Mailing street address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**B. Fill out this section ONLY if you're donating the suggested \$20 or the minimum \$10 per card to have Meals on Wheels mail each card directly to the recipients.** *Please check either honor or memorial. If you check both by mistake, we'll send an honor card. You can also send this information to rhovious@mowgvl.org.*

**Card #1** .....

My gift is  in honor  in memory of *(Provide loved one's name)* \_\_\_\_\_

Sign card from \_\_\_\_\_

Please send card to *(Provide recipient's name)* \_\_\_\_\_

Street address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Card #2** .....

My gift is  in honor  in memory of *(Provide loved one's name)* \_\_\_\_\_

Sign card from \_\_\_\_\_

Please send card to *(Provide recipient's name)* \_\_\_\_\_

Street address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Card #3** .....

My gift is  in honor  in memory of *(Provide loved one's name)* \_\_\_\_\_

Sign card from \_\_\_\_\_

Please send card to *(Provide recipient's name)* \_\_\_\_\_

Street address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Card #4** .....

My gift is  in honor  in memory of *(Provide loved one's name)* \_\_\_\_\_

Sign card from \_\_\_\_\_

Please send card to *(Provide recipient's name)* \_\_\_\_\_

Street address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Card #5** .....

My gift is  in honor  in memory of *(Provide loved one's name)* \_\_\_\_\_

Sign card from \_\_\_\_\_

Please send card to *(Provide recipient's name)* \_\_\_\_\_

Street address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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**STEP 6: Mail, drop off, fax or email form to Meals on Wheels of Greenville.**

*Address: 15 Oregon St, Greenville, SC 29605 • Fax: 864.235.1264 • Email: rhovious@mowgvl.org*

*To ensure cards are postmarked by December 17, we must receive your completed form no later than December 11.*