

# Membership Donation Form

## For mail or fax

**Yes! I would like to support the work of the FSH Society - education, outreach and research!**

\_\_\_ I would like to make a membership donation in the amount of \$ \_\_\_\_\_

\_\_\_ My company would like to match my gift. I have enclosed the matching gift form.

With a gift of \$50 or more, you:

- Receive news on research, the Watch newsletter, and other communication about Facioscapulohumeral muscular dystrophy (FSHD)
- Join together with others in the FSHD community to find treatments for patients, to improve their quality of life, and to help provide hope for a cure through the promise of research
- Will be acknowledged in the Annual Donor report, unless we hear otherwise

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Name(s): \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_ I have enclosed a check payable to the *FSH Society, Inc.*

VISA             Mastercard             American Express             Discover

\_\_\_ I would like to pay by credit card:

Credit Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Name on the Card: \_\_\_\_\_

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**Please mail or fax this form to:**

**FSH Society, Inc.**

**64 Grove Street**

**Watertown, MA 02472**

**Fax: (617) 658-7879**



The Facioscapulohumeral (FSH) Society is an independent 501(c)(3) non-profit and tax-exempt U.S. corporation organized to address issues and needs specifically related to Facioscapulohumeral Muscular Dystrophy (FSHD). Contributions are acknowledged for tax purposes.