

Honor or Memorial Form

Name:	
(Please list name as you would like for it to appear)	
Address:	
Phone:	Email:
I/we would like to support the Geo	orgia Conservancy by making an honor or memorial gift.
• Enclosed is our check in the a	amount of \$(Please make checks payable to the Georgia Conservancy)
Type of gift:	
Honor	
Memorial	
Name of person you are recognizin	ng with an honor or memorial gift:
Address:	
	Georgia Conservancy 817 W. Peachtree Street, Suite 200 Atlanta, GA 30308 404-876-2900