



**ZORA! Festival Fund
The Grassroots Campaign**

Name: _____

Institution/Organization: _____

Address: _____

Number

Street

City, State, Zip Code: _____

Phone: (Day) _____ (Evening) _____

(Cell): _____ (Fax) _____

Email address: _____

Method of Payment (please \checkmark check one)

___ Cashier's Check Enclosed ___ Money Order Enclosed
(Make Payable to: ZORA! Festival Fund)

Payments are tax deductible – 59-2952662

Bill to Credit Card: (Please \checkmark check one)

- Visa _____
- Master Card _____
- American Express _____
- Discover Card _____

Card Number: _____

Expiration Date: (mm/yr) _____ / _____ / _____

Signature: _____

Would you prefer to remain anonymous? ___ Yes ___ No

Please acknowledge me as: _____

ZORA! Festival is presented by The Association to Preserve the Eatonville Community, Inc. (P.E.C.)
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Phone: (407) 647-3307 ♦ Fax: 407-539-2192