



I want to be a part of the team that is supporting NAAREF and its programs for the industry's future. These programs include PAASS®, the industry's premier safety program, Operation S.A.F.E.®, Compaass Rose®, and other educational and safety programs. Together, we can ensure a role for aerial application in the production of America's food and fiber.



Here is my **tax-deductible** contribution!

___ Over \$5,000	___ \$5,000	___ \$2,500
___ \$1,000	___ \$500	___ \$250
___ \$100	___ \$50	___ Any amount is appreciated

My credit card information or a check (payable to NAAREF) in the amount of \$ \_\_\_\_\_ is enclosed.

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_

Fax \_\_\_\_\_

E-mail \_\_\_\_\_

**All contributions are tax deductible**

Mail Completed Donation Form to:

NAAREF

1440 Duke Street

Alexandria, VA 22314

Phone 202-546-5722

**METHOD OF PAYMENT:**

☐ Check ☐ Money Order ☐ Credit Card

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

Card #: \_\_\_\_\_

CVV # \_\_\_\_\_ Card Exp. (Mo/Yr): \_\_\_\_/\_\_\_\_

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