



Contributor to:

ROCKY MOUNTAIN HORSE RESCUE
9190 ALKIRE ST., ARVADA, CO 80005
(303) 424-0037

Name: _____ Date: _____

Address: _____

Phone (home): _____ Work: _____ Cell: _____

E-mail: _____ Fax: _____

Contribution Amount: \$_____ or type of donation: _____

Would you like to volunteer? _____ How would you like to help? e.g. safehoming, computer skills,
telephone messages, horse care, hauling, grant writing, fund raising, . . . _____

Please send checks to: Rocky Mountain Horse Rescue
9190 Alkire St.
Arvada, CO 80005



Contributor to:

ROCKY MOUNTAIN HORSE RESCUE
9190 ALKIRE ST., ARVADA, CO 80005
(303) 424-0037

Name: _____ Date: _____

Address: _____

Phone (home): _____ Work: _____ Cell: _____

E-mail: _____ Fax: _____

Contribution Amount: \$_____ or type of donation: _____

Would you like to volunteer? _____ How would you like to help? e.g. safehoming, computer skills,
telephone messages, horse care, hauling, grant writing, fund raising, . . . _____

Please send checks to: Rocky Mountain Horse Rescue
9190 Alkire St.
Arvada, CO 80005