



Application for Helen Keller Award

We Serve

Individuals Name:

IMPORTANT ! *Please print clearly, exactly as it should appear on the plaque*

Address _____
Number and street name, apartment number, post office box

City, State or Province, Postal code

Lionistic affiliation of Recipient _____

Club Name _____ District 5M _____

Is this a memorial? Yes _____ No _____

Is the recipient to be named later? Yes _____ No _____

Name of Donor _____

Address _____
Number and street name, apartment number, post office box

City, State or Province, Postal code

This donation is from (check one) an Individual _____, a Club _____, a District _____, Other _____

Enclosed is our check, bank draft, or money order payable to the Minnesota Lions Eye Bank for U.S. \$ 1,000 or equivalent. _____

Enclosed is our check in the amount of \$ _____. The balance should come from previous contributions made to the Minnesota Lions Eye Bank

Please type or print name, complete address and telephone number of the person to whom the plaque, etc . are to be sent for presentation to the recipient. **Note!** The plaques are delivered VIA U.P.S. and they will not deliver to a P.O. Box.

Name _____

Street Address _____

City, State, Zip, and Telephone # _____

Mail completed form to:

Minnesota Lions Eyebank
Frank Loreno
3004 36th. Ave. N. E.
St Anthony, MN 55418