



THANK YOU FOR MAKING AN INVESTMENT IN COMMUNITY SAFETY!

Registration Form / Individuals, Families & Small Business Proprietors

Name_____

Mailing address_____

Web Address_____

Primary Representative

Name_____ Title_____

Email_____ Phone_____

Referred by_____

- ☐ Patrol Officer / Individual - \$50.00
- ☐ Sergeant / Add Spouse or Friend - \$75.00\
- ☐ Lieutenant / Family - \$150.00
- ☐ Captain / Small Business Proprietor - \$250.00
- ☐ Check enclosed / Payable: Cleveland Police Foundation

Mail: 2301 Payne Avenue, Suite 201
Cleveland, OH 44114 / Attn: Rick DeChant, Executive Director

☐ Credit Card

Type: ☐ VISA ☐ MC ☐ Amex / Account #: _____

3-digit CVV#: _____ 4-digit CVV# (Amex): _____

Name: _____

Signature: _____