Please select the Local Section of your choice—donations can be split.

☐ AIHA Local Section General
☐ Alabama
☐ Carolinas
☐ Chicago
☐ Connecticut River Valley
☐ Barbara Dawson—Delaware
☐ Florida
☐ Georgia
☐ Lehigh Valley
☐ Mid-South
☐ New England
☐ North Texas
☐ Northern California
☐ Ohio Valley (graduate)
☐ Ohio Valley (undergraduate)
☐ Philadelphia
☐ Pittsburgh
☐ Yuma Pacific

Please note... Not all AIHA Local Sections offer a scholarship or have the AIHF administer a scholarship. If you do not see your Local Section listed, please contact them directly. If they do not offer a scholarship, you can still make a donation using the AIHA Individual Donors Form.

Donor Information
Prefix: ______ First Name: ____________________ Last Name: ____________________ Suffix: ______
Address: ____________________________________________________________
City: __________ State/Province: ______ Country: ______ Zip/Postal Code: ______
Phone: ______________ Fax: ______________ Email: ______________

Payment Information
Option #1: I would like to make a donation in the amount of $_____, payable in U.S. funds by ☐ Check (enclosed) or ☐ Credit Card**

**Please note: For credit card security, credit card payments cannot be accepted via email. Please fax the form to our secure fax at (703)207-3561 or contact Thursa La at (703) 846-0720.

Option #2: ☐ Stock transfer—amount is approximately $__________

Option #3: ☐ A pledge of $__________ over a _______year period

Scholarship Awards

Scholarships awards are based on donations received during the calendar year. Donations must be received postmarked no later than December 31 to qualify for the current year cycle. Donations received after December 31 will be applied to the next scholarship cycle. I understand and acknowledge that my donation is not refundable.

While the AIHF makes every effort to award scholarships to individuals based on the criteria specified, should there not be an individual who aligns with the criteria as a whole, an individual who closely aligns with the criteria may be selected.

Signature: ___________________________ Date: ___________________________