

**2017-2018
Avery McKinley
Individual
Commitment**



NAME: _____

CLUB: _____ DIST _____

Amount enclosed (\$25 each) _____ Check# _____ Credit Card _____

Credit Card # _____ Exp Dt _____ Security Code _____

Authorized Signature _____

Mail this form, with contribution to: Lions Sight Foundation
431 Katherine Drive
Flowood MS 39232

Make Checks Payable to: Lions Sight Foundation, indicate in memo area - Avery McKinley

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