

**Foundation of the National Student Nurses' Association, Inc.**

**Disaster Relief Fund – Individual Contribution Form**

In response to requests from students who lost their homes, schools, and in some cases, family members, the Foundation of the National Student Nurses Association (FNSNA) created a FNSNA Disaster Relief Fund in 2005. The Funds may be used to assist students in paying tuition, fees, books, supplies (uniforms, stethoscopes, etc.), or assist schools of nursing in replacing library books, computers, or any other vital equipment necessary in educating their student nurses. All contributions are tax-deductible and will be acknowledged. If your school or state wishes to contribute, use the [FNSNA Chapter Contribution Form](#).

Mail to:  
Foundation of the National Student Nurses' Association, Inc.,  
45 Main Street, Suite 606, Brooklyn, NY 11201  
FAX credit card payment to: (718) 797-1186

If you have a specific disaster relief area you would like your contribution to go to, please include here (i.e. Haiti Earthquake) \_\_\_\_\_

Name \_\_\_\_\_ Phone (    ) \_\_\_\_\_

Permanent Address \_\_\_\_\_  
Number \_\_\_\_\_ Street \_\_\_\_\_ Apt. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail address \_\_\_\_\_

**Amount of contribution** (check):  \$250  \$150  \$100  \$50  \$25 Other Amount \_\_\_\_\_

Check enclosed/attached (Make check payable to FNSNA)

**Credit Card Payment:**  MasterCard  Visa

Amount of charge \$ \_\_\_\_\_ Zip code for card holder address \_\_\_\_\_

Print Name on Card \_\_\_\_\_ Signature \_\_\_\_\_

Card # \_\_\_\_\_ Expiration date \_\_\_\_\_

Mailing address of credit card holder:  check here if the same as above.

Street \_\_\_\_\_ city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_

Thank you!

\* FNSNA is organized as a 501 (C)(3) charitable foundation (EIN 13-3123125). Your contribution is tax deductible in the year paid Please keep FNSNA informed of address changes. All contributions will be acknowledged via mail.