NSS Donation Form
Please print and mail your completed application.

Name: __________________________________________ NSS Number: __________________ if any

Telephone: _______________________________ E-mail: ___________________________________

Address: ___________________________________________________________________________

City: ____________________________ State__________ Zip ____________ Country __________

I would like to donate to the National Speleological Society: $____________

I direct my contribution to be placed in the following fund/s (percent or dollars):

- Society Donation (Money used for the betterment of the Society)
- NSS Headquarters (Helps with expenses supporting the NSS core mission)
- Save-the-Caves Fund (Supports cave conservation)
- Cave Education Fund (Promotes programs for primary and secondary students)
- Nature Preserves Fund (Supports NSS nature preserves)
- Cave Acquisition Fund (Acquires NSS caves; grants to cave conservancies)
- International Exploration Fund (Supports expeditions outside the US)
- Sara Corrie Memorial Fund (Provides income for US cave exploration)
- Ralph W. Stone Research Fund (Provides research grants)
- Lew Bicking Fund (Endows this award for exploration)
- Peter M. Hauer Fund (Endows this award for speleolology research)
- James G. Mitchell Fund (Endows this award for a paper by an author under 21)
- Library/Museum Fund (Provides funds for acquisition of publications and memorabilia)
- Cave Rescue Training Fund (Provides scholarships for NCRC training)

☐ I would like to make my donation in the name of: _________________________________________

☐ I would like a donation acknowledgement sent to the honoree or family:

Name: _____________________________________________ NSS Member? Number ____________

Address: ___________________________________________________________________________

City: ____________________________ State__________ Zip ____________ Country __________

Payment:       Check       Money Order [Make check/MO payable to “NSS”]

Credit Card Number: _______________________________ Expires: _____/_______

Name on credit card: _______________________________ CVV __ ___ __

Your signature: _____________________________________________ Date ____/____/____

Thank you for your support!

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