

Marvin Chambers Fellowship

(Saskatchewan Lions Foundation)

Application Form

Name of Club or Individual
Making the Contribution (\$500) _____

Contact Name _____

Address _____

Name of Recipient of
Marvin Chambers Fellowship _____

Contribution designated to:

- Pediatric Ophthalmology
 S.T.A.R.S. (Shock Trauma Air Rescue Service)
 Other (please specify) _____
 Undesignated

Please complete one form for each recipient of the
Marvin Chambers Fellowship.

Make cheques payable to the Saskatchewan Lions Foundation
and mail to:

Lion Don Tait, Box 854, Wadena, SK S0A 4J0