



THANK YOU

FOR INVESTING IN FAMILIES

Donor/Organization:	
Sponsorship Level	
Support Our Girls: _____	
Payment Instructions:	<input type="checkbox"/>
Check enclosed:	
Credit Card # _____	
Expiration Date: _____	<input type="checkbox"/>
Security Code: _____	
Invoice me:	Invoice Date: _____
Special Instructions:	<input type="checkbox"/>
In Kind Services Donation:	
Signed:	
Email address:	
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