

.....Print out, fill in and mail to.....

The Friendship Foundation: 2108 Vail Avenue, Redondo Beach, CA 90278

DONOR LEVEL

A Gift of a Vision
\$2500+

A Gift of Compassion
\$1000+

A Gift of Acceptance
\$500+

A Gift of Joy
\$250+

A Gift of Laughter
\$100+

A Gift of Friendship
\$50+

DONATION AMOUNT

My 2016-2017 Gift: \$ _____

Your gift provides children with special needs over 56 programs and activities every year. Every gift matters. Thank you for your generosity.

PAYMENT METHOD

Please make checks payable to The Friendship Foundation

Enclosed is my check

Charge my credit card today

Set up recurring payments. Charge my card \$ _____ monthly for _____ months

Credit Card Information

Name on card _____

Amex Visa MC # _____

Signature _____ Exp _____ CSC: _____

Matching Gift Info - My company will match

Yes No

Company Name: _____

I want my gift to be anonymous