



**GREAT KIDS, INC.
ADOPT-AN-ORPHANAGE PROGRAM
DONATION FORM**

CONTACT INFORMATION:

FIRST NAME: _____

LAST NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____

ZIP CODE: _____

DAYTIME PHONE: _____

EMAIL: _____

PAYMENT INFORMATION:

TYPE OF PAYMENT:

___ CHECK ENCLOSED ___ VISA ___ MASTER CARD ___ AMERICAN EXPRESS

CREDIT CARD NUMBER: _____

NAME ON CARD: _____

EXPIRATION DATE: _____

SIGNATURE: _____

GIFT AMOUNT:

- | | |
|--|--------------|
| ___ \$7,500.00 | ___ \$750.00 |
| ___ \$5,000.00 | ___ \$500.00 |
| ___ \$3,750.00 | ___ \$100.00 |
| ___ \$2,500.00 | ___ \$50.00 |
| ___ \$1,000.00 | ___ \$25.00 |
| ___ OTHER (<i>PLEASE SPECIFY AMOUNT</i>) _____ | |

All donations make an impact and are tax deductible to the extent permitted by law.

THIS CONTRIBUTION IS:

___ MY PERSONAL GIFT

___ GIVEN IN MEMORY OF _____

___ A GIFT FOR _____

ON THE OCCASION OF _____

PLEASE NOTIFY _____

PLEASE MAIL OR FAX YOUR GIFT ALONG WITH THIS COMPLETED FORM TO:

**GREAT KIDS, INC. ADOPT-AN-ORPHANAGE PROGRAM
1200 NEW CHURCH COURT
AMBLER, PA 19002
325-224-4417 (FAX)**