



YES, I would like to make a donation to help children with cancer!

Enclosed is my tax-deductible gift for:

\$25 \$50 \$100 \$250 \$500 \$ _____

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

I wish to make my gift in memory or in honor of:

Child's Name _____

In Memory In Honor

Please send a receipt for my tax-deductible donation to:

Name _____

Address _____

City _____ State _____ Zip _____

Please print and send this form and your donation to:

Childhood Cancer Guides
P.O. Box 31937
Bellingham, WA 98228