



CIRCLE OF HOPE

DONATION FORM

Please complete this form and mail it with your check (payable to Circle of Hope) to:

**1329 Highland Ave. Suite 3
Needham, MA 02492**

Name _____

Address _____

(Street)

(City)

(State)

(Zip)

Email _____

TRIBUTE GIFTS

My gift is **in honor** / **in memory** of: _____
(Please circle one) *(Honoree Name)*

Please send a card acknowledging my gift to: _____
(Recipient Name)

(Recipient Address)

- Please sign me up to receive COH's monthly **e-newsletter** and other important news.
- Please add me to the **Go-To Crew** so I receive email alerts about urgent donation needs.
- I am interested in **volunteering** for Circle of Hope.

Donations can also be made online at www.circleofhopeonline.org