

Mail in Donation Form

Thank you for making a donation to Hope's Wings. Your gift allows us to provide the necessary support, programs, and services to survivors as they build lives free from violence.

Please print this form and send your gift to:

Hope's Wings
PO Box 488
Richmond, KY 40476

My Contact Information

Name _____

Address _____

City _____ **State** _____ **ZIP Code** _____

Email Address _____

By providing your preferred email address, you will help Hope's Wings communicate with you more effectively. Your information privacy is as important to us as it is to you. We will not sell, exchange or give your email address to a third party.

Join Our Email List Yes, I would like to receive news from! Please do not add me.

Gift Information

Donation Amount \$50 \$100 \$150 \$250 \$1,000 Other \$_____

Payment Information

My donation is enclosed - Please make checks payable to Hope's Wings

Please charge my MasterCard Visa the amount indicated above.

Credit Card Number _____ **Expiration Date** _____

Name on Card _____

Signature _____

To Make a Gift In Honor Of or In Memory Of:

Recipient Name _____

Address _____

City _____ **State** _____ **ZIP Code** _____

Hope's Wings Domestic Violence Program is a 501 (c)(3) nonprofit organization (federal tax ID#20-4496496). All donations are tax-deductible to the extent allowed by law.