

OUTREACH TO HAITI - DONOR FORM



I want to support Outreach to Haiti in 'Helping Haitians help Haitians.'

My donation (please check the one that applies):

I want to provide support in the amount of \$ _____. I would like to provide this support:

- Annually
- Quarterly
- Monthly
- As a one-time donation of \$ _____.

I want my funds to support (please write the amount of this donation you wish to go toward each program):

- The most urgent need: \$ _____
- Education programs: \$ _____
- Medical programs: \$ _____
- Meal programs: \$ _____
- Orphanage support: \$ _____
- Our mission house: \$ _____

Payment options (please check the option that works best for you):

- I have enclosed a check. (Checks should be made to: Outreach to Haiti)
- I would like to pay with my debit or credit card:

Credit card type (MasterCard or Visa only): _____

Card number: _____

Expiration date: _____

3 Digit Code: _____

Donation amount: \$ _____

Frequency of payment (eg, one-time, monthly, annually): _____

I, _____, authorize the payment as designated above.

Signed _____

- I pledge \$ _____ to Outreach to Haiti, and I will send in these funds over the next _____.

Please send a payment reminder once every _____.

Other options (Please check all that apply):

- Please contact me so that I can learn more about Haiti.

My name: _____

My telephone number: _____ My e-mail: _____

My street address: _____

City: _____ State: _____ Zip: _____
 Add me to your e-mail listserve (group e-mailing) so that I can receive occasional news about Outreach to Haiti and developments in Haiti.
E-mail address: _____

Please mail this completed form to:

*Outreach to Haiti
815 Boswell Ave.
Norwich, CT 06360*

If you have questions, you also can contact us at:

*860.887.1019 ext. 817
info@outreachtohaiti.org*