



Hats, Hearts & Handbags

I would like to help provide girls a place to G.R.O.W. confident, strong, and independent!

Enclosed is my gift of \$_____. (Kindly make check out to Girls Place, Inc.)

Please charge my gift of \$_____ to my credit/debit card. (Kindly provide telephone number below, a Girls Place representative will contact you for your information.)

I would like to pledge \$_____ each year for the next _____ years.

Please send me pledge reminders quarterly biannually annually.

My gift is to support:

Girls Place's Greatest Needs

Capital Projects Fund

Scholarships

Other _____

Contact Information:

Name: _____

Address: _____

City, State, Zip: _____

Telephone: _____

Please credit my gift to the table of: _____

Thank you for your support!

Gifts to Girls Place may be tax deductible. Consult your tax professional for details.

A copy of the official registration and financial information may be obtained from the Division of Consumer Services by calling toll-free (1-800-435-7352) within the state. Registration does not imply endorsement, approval, or recommendation by the state. Charitable Organization Registration Number: CH21.