

PRINTABLE CORPORATE DONATION FORM

Fill out the form below and print it to mail in with your donation.

Enter your contact information. Required fields are marked with an asterisk (*).

*First Name:	Initial: *Last Name:
*Address 1:	
Address 2:	
*City:	*State: *Zip:
*Day Phone:	*Evening Phone:
(e.g. 631-555-1000) *Email (to receive a confirmati	(e.g. 631-555-1000) on of your donation):
Your email address will NOT be shared with outside organizations. Please enter companies name(s) as you would like it to appear as a sponsor:	
I wish to make this contribution anonymously.	
Please circle your givin	g level.
☐ Van Sponsorship 1 Year	(\$3,500 U.S. or greater contribution)
☐ Van Sponsorship 2 Years	(\$6,000 U.S. or greater contribution)
☐ Van Sponsorship 3 Years	(\$8,500 U.S. or greater contribution)
	ponding corporate sponsorship amount in the form of a business check to: f Hope, P.O. Box 1247, Huntington, New York 11743

Please note that by filling out this form and mailing a check, you authorize Toys of Hope to publish as well as publisize your organizations involvement with media, news, press releases, in print, on television, on our vehicles, as well as on the internet.