

**Yes! I would like to contribute to Cover Our Kids with Care.**

Donor Category:

**One quilt square - \$18.00****Four square patch - \$72.00****One quarter of the quilt - \$180.00****One half of the quilt - \$500.00****An entire quilt - \$1000.00**

Amount:

Full Name:

Address:

City:

State/Province:

Postal Code:

Phone:

**Payment Information**

Payment preference:

I have enclosed a cheque

I wish to pay by credit card

Card Type:

Visa

MasterCard

Card Number:

Name on Card:

Expiry Date:

**You may choose to acknowledge your donation by sending out a tribute card.** Yes. I would like to have a tribute card sent out.

	No. I do not wish to have a tribute card sent out.
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	I do not wish to be listed in the annual report.
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<b>Tribute Card Information</b>	
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	In Memory Of
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	In Honour Of
--	--------------

Full Name:	
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Address:	
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City:	
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State/Province:	
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Postal Code:	
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Message to accompany the card:	
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How would you like the card signed?	
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**Fax this form to 477-7450 or mail in with postage paid envelope to:**

Jewish Child and Family Service  
Suite C200 – 123 Doncaster St  
Winnipeg MB R3N 2B2