## Champlain Adaptive Mounted Program DONATION FORM



## I want to make a difference in someone's life through my financial support of CHAMP's program.

ENCLOSED IS MY CI	HECK FOR :	
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Your Name:		
ADDRESS :		
Street:		
City:	State:	Zip:
<b>CONTACT INFO :</b>		
Email:		
Phone:		
Best Time of Day for Phone Call:	Morning (8-12am) Evening (4-8pm)	Afternoon (12-4pm) Prefer Email
I would like to	make a gift using appr	eciated securities.

Please contact me with information on how to do this.

I would like to make a lasting difference through my estate.

CHAMP at Good Hope Farm 57 East Shore Road South Hero, VT 05486 (802) 372-4087 info@vtchamp.org