

SUPPORT A GIRL



girls
inc.®

Girls Incorporated®
of Sarasota County

SUPPORT-A-GIRL

___ I/We will support ___ girl(s) for ___ year(s) for the actual cost of services - \$3,000 per year per girl.

___ I/We will support a ___ girl(s) for a full year of After-School programming for \$2,000 per girl.

___ I/We support a ___ girl(s) for a full Summer of programming for \$1,000 per girl.

___ I/We support a girl for ___ (#) months of After-School programming for \$200 per month.

___ I/We would like to make a one time gift of \$_____.

___ Please contact me about a legacy gift.

___ I am interesting in volunteering at Girls Inc.

Name For Recognition: _____

Address: _____

Phone: _____

Email: _____

My check payable to **Girls Incorporated®** is enclosed.

Please charge to my credit card. Visa MasterCard AmEx

Card # _____ Exp. Date _____

One time charge of _____ to my credit card.

Monthly payments for the amount of \$_____ on the _____(date) of each month charged to my credit card.

Name (as it appears on card): _____

Signature: _____

Thank you! Your contribution of any amount is greatly appreciated.

"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: SC-00801