



## 2020 Healing Hearts Society Fundraising Breakfast

**YES, I would like to have a H.E.A.R.T. for grieving children:**

Consider a recurring monthly donation for Ele's Place West Michigan and have a H.E.A.R.T! Your healing, electronic and recurring transaction can be easily withdrawn from your credit card or checking account on a monthly basis. And, contributing in this way is cost effective, making your support of grieving children and teens go that much further! Have H.E.A.R.T today!

**I will contribute \$\_\_\_\_\_ monthly to Ele's Place West Michigan in order to ensure that no child or teen has to grieve alone!**

**Payment:**

- ☐ Please charge my credit card monthly. Card #:\_\_\_\_\_ Exp. \_\_\_\_\_
- ☐ Please contact me about paying via electronic funds transfer through my bank.
- ☐ My company will match my gift. Company name: \_\_\_\_\_  
*Please ask your employer if they have matching gift program.)*
- ☐ Please tell me how I can leave a legacy and help future generations of grieving children through my will or estate plan.

**Please list my/our name(s) as follows:**

Name:\_\_\_\_\_

Address:\_\_\_\_\_

City:\_\_\_\_\_ State:\_\_\_\_\_ Zip:\_\_\_\_\_

Home Phone:\_\_\_\_\_ Cell:\_\_\_\_\_

Work Phone :\_\_\_\_\_ Company:\_\_\_\_\_

E-mail address:\_\_\_\_\_