

DNDA Adopt-A-Family 2005 Sponsor Form

I would like to: Donate Money to the Adopt-A-Family Project

Organize a toy or clothing drive

Adopt-A-Family

Individual Sponsorship—Sponsor Name: _____

Group Sponsorship—Primary Contact Name: _____

Sponsor Address _____

Phone: () _____ Fax: () _____ Email: _____ @ _____

Number of families you would like to sponsor _____ Size of family you would like to sponsor _____

Gift Delivery: Croft Place Townhomes, 6701 21st Avenue SW, Seattle, WA 98106

**Note* Please call before delivery of your gifts. We suggest delivery the week of Dec. 12th-16th.*

Monetary Contributions

I would like to donate \$_____ to the DNDA Adopt-A Family Program

Check enclosed (payable to DNDA)

Charge my VISA –Mastercard (please circle one)

Account # _____ - _____ - _____ - _____ Expiration Date: ____ / ____

Signature _____ Date: ____ / ____ / ____

**Please FAX completed forms to (206) 923-0920 Attn: Phillipia Goldsmith,
Email: phillipiag@dnnda.org, or send via postal mail:**

**DNDA—Adopt a Family Program,
5411 Delridge Way SW, Seattle, WA 98106.**

Help!!!! I have a question please contact me at _____

SEASON'S GREETINGS!!!!

Office Use: Family Assigned _____ Date Assigned _____