



The Children's Center of Hamden

Donation Form

Each donation is greatly appreciated and supports programs for the needy children we serve. Your gift is tax-deductible to the full extent of the law. Thank you for your consideration and generosity.

Please print this form, complete it and send with your check to the address listed below.

Does your company have a Matching Gift Program? Double the value of your donation.
Please check with your Human Resources Department for the appropriate form.

Donation Information

Donation Amount \$ _____ Please make check payable to The Children's Center of Hamden

Donor Name: _____

Address: _____

City/State/Zip: _____

Email: _____

Please designate this gift to:

Wherever the need is the greatest This program or event: _____

Tribute Gift Information

When you make a gift in honor of or in memory of a special person, The Children's Center of Hamden will send an acknowledgement card to the person you designate. The amount of your gift will not be disclosed unless you instruct us otherwise.

This gift is:

in memory of in honor of _____

Occasion: _____

Please acknowledge my gift to:

Name: _____

Address: _____

City/State/Zip: _____

Mail to:
Diane Bell Surprenant
Director of Personnel & Development
The Children's Center of Hamden
1400 Whitney Avenue
Hamden, CT 06517