



# Changing Lives ~ One Person at a Time.

Join us in improving the health and well-being of women, children, families and communities living in the greater Jérémie region through healthcare, education and community development.

**Donation Preferences:**

**Gift Amount in USD:** \$\_\_\_\_\_

I would like this donation to be:  one-time donation  monthly  quarterly

**My donation is:**  In honor of  In memory of  Other:

Please include  My name  The gift amount in the notification

Send gift notification to: \_\_\_\_\_

Please direct my donation to the specific program or fund as checked below:

- Where HHF needs it most
- Clinic Needs (patient care, medicines, medical supplies, diabetes/HIV treatment, etc.)
- Happier House (\$1,950)
- Feed-a-Child:  \$25/month  \$300/year
- Save-a-Family:  \$25/month  \$300/year
- Sponsor-a-Student`s Education (\$350)
- Adopt-a-Village (\$5,000)
- Healthy Pregnancy-Healthy Motherhood (Center of Hope)
- Composting Toilet (\$450)
- Give-a-Goat (\$150)
- Solar Light Kit (\$75)
- Roof Repair (\$500)

**Contact Information** (An asterisk \* indicates a required field)

\* First Name: \_\_\_\_\_ \* Last Name: \_\_\_\_\_

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

\* City: \_\_\_\_\_ \* State: \_\_\_\_\_ \* Zip Code: \_\_\_\_\_ \* Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Method of Payment:**

- Cash  Check (made payable to: Haitian Health Foundation)  Securities
- Credit Card (VISA, MasterCard or AmEx), please call us at (860) 886-4357 or visit [www.HaitianHealthFoundation.org](http://www.HaitianHealthFoundation.org)

**Mail all payments to:**  
Haitian Health Foundation  
97 Sherman Street • Norwich, CT 06360

## THANK YOU FOR YOUR SUPPORT!

