



## Honorary Gifts

Thank you for helping us help children!

Honoree's Name: \_\_\_\_\_

Honoree's Address: \_\_\_\_\_

Town/State/Zip: \_\_\_\_\_

For gifts over \$25, a card of your choice will be sent to the honoree. Please select an occasion card you would like us to send.

**Anniversary**  
**Birthday**  
**Congratulations**

**General**  
**Seasonal**  
**Sympathy/Memorial**

Card Message: \_\_\_\_\_

\_\_\_\_\_

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

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

Town/State/Zip: \_\_\_\_\_

Telephone or Email: \_\_\_\_\_

Credit Card Type: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

3 Digit Authorization Code: \_\_\_\_\_

Check Number: \_\_\_\_\_

Please make checks payable to *The Children's Law Center*.

Remit this form to: *The Children's Law Center, 30 Arbor St, Hartford, CT 06106*

Or fax this form to: *(860) 232-9996, Attention: Alison Mundy*