

Enclosed please find my/our tax-deductible contribution to: Parenting Resource Associates, Inc.

4 Militia Drive, Suite 7, Lexington, MA 02421

NAME: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

GIFT IN HONOR OF: _____

LEADERSHIP: ___\$10,000 ___\$7500 ___\$5,000 ___\$2,500

SUSTAINER: ___\$1,000 ___\$750 ___\$500 ___\$250

FRIEND: ___\$100 ___\$75 ___\$50 OTHER: \$_____

___ I/WE WOULD LIKE MY/OUR DONATION TO GO SPECIFICALLY TO:
(Optional Designation of Gift)

___ COMPASS for homeless families

___ REACH (Resources for Early Childhood educators & programs)

___ PACES (Parenting Coaching, Education and Support)

___ Please check here for your donation to remain anonymous.

___ My company participates in a matching gift program

Donations on line at:
www.parentingresourceassociates.org

___ I/we would like more information about Parenting Resource Associates

___ I/we would like to be more involved with Parenting Resource Associates, personally or via a business partnership