



Yes, I/We want to support New Perceptions with the enclosed gift of \$_____.

Your gift will benefit the programs of New Perceptions. If you would like to designate your gift to a specific area, please indicate: _____

- This contribution is a:
- General donation
 - On the occasion of _____
 - In honor of _____
 - In memory of _____

Please notify the following of my gift (gift amount will never be revealed):

Name _____

Address/City/State/Zip: _____

My/Your name (as you would like to be acknowledged): _____

Please recognize me anonymously

Address/City/State/Zip: _____

Phone: (_____) _____ Email: _____

Cash enclosed

Check enclosed (made payable to New Perceptions)

Please charge to my Visa Mastercard American Express Discover

Account #: _____ Exp. Date: ____ / ____ Zip Code: _____

Authorized signature: _____ Date: _____

**If your company has a Matching Gift program, please send your completed company form with your donation.*

Thank you for your generous contribution!
Contributions are tax-deductible as allowable by law.

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