

USD Child Sponsorship Donation Form by Mail

I'd like to become a	child sponsor!		
I'd like to support a:	☐ Child in a Village	☐ Child in an (
	# Of Sponsorships	# Of Sponsors	hips
PAYMENT OPTION Choose an Exclusive (bo		d) or a <i>Shared</i> (be 1 of	2 sponsors per child) sponsorship.
☐ I'd like to pay by ch	neck MONTHLY (make a m	onthly payment to spo	onsor a child):
\square Mc	onthly <i>Exclusive</i> Child Sponsor	ship USD 70	
	onthly Shared Child Sponsorsh	ip USD 35	
☐ An ☐ An ☐ To double/triple the	neck ANNUALLY (make a nual Exclusive Child Sponsors nual Shared Child Sponsorship e amount of my donation, I ha a gift. Please include recipient's na	nip USD 840 0 USD 420 ave enclosed my comp	pany's matching gift application.
Please complete the contact CONTACT INFORM	details section below so OneSky ca MATION:	n send you a tax receipt fo	er your gift of sponsorship.
Name:		Email:	
Tel:		Fax:	
Address:			
City:		State:	Zip:

Please make check payable to "OneSky". Please mail your check with this form to:

OneSky

715 Hearst Avenue, Ste. 200 Berkeley, CA 94710 USA

All personal data collected will be treated as strictly confidential and will be used only for receipting and other communication with you. Your donation(s) helps mitigate the damage to children without loving, responsive care during their most critical early years. Thank you for your generous support!

Phone: +1(510) 525-3377, Fax: +1(510) 525-3611, Email: sponsor@onesky.org