

YES! I WANT TO SHOWER THEM WITH A GIFT!

Enclosed is my donation for:

____\$25 Worms, nuts & seeds ____\$250 Basket of birds for 1 week
____\$50 Nest & medical supplies ____\$500 Basket of birds for 2 weeks
____\$100 Specialty foods ____Other amount \$_____

Name:_____

Address:_____

City/State/Zip:_____

Phone:_____ Email*:_____

*By providing this information you are opting in to our mailing list

☐ VISA ☐ MASTERCARD ☐ CHECK ENCLOSED

Card #:_____ Exp Date:_____

CVV:_____ Signature:_____

I would like a receipt via: ☐ Mail ☐ E-Mail:_____

All contributions are tax deductible to the extent allowed by law (Nonprofit ID# 68-0354986)

WE APPRECIATE YOU!