

Contribution Form

Your gift will enable the "I Have A Dream" Foundation – New York to motivate and empower children living in low-income communities to reach their educational and career potential.

To make a donation, please send your check or money order (made out to the "I Have A Dream" Foundation – New York) to:

Thierry Cazeau
Executive Director
"I Have A Dream" Foundation – New York
330 Seventh Avenue, 20th Floor
New York, New York 10001

To make a gift by credit card, please visit our website at www.ihaveadreamny.org, or complete the form below and mail or fax it to 212-293-5478, Attn. Thierry Cazeau.

Name (as it appears	s on your card):				
Address:					
		_ Fax: E-mail:			
Gift Amount:	□ \$100	□ \$250	□ \$500	□ \$1,000	□ \$2,50
□ \$5,000 □ \$	10,000 □ Oth	er/\$			
□ I would like to thi	s donation to be a	monthly gift t	o the "I Have A I	Dream" Foundatio	on – New Yo
Please charge my credit card \$each month, endir			month, ending o		
Credit Card Type (p	lease circle one):	Amex Ma	sterCard Vis	a Discover	
Credit Card Number:			Expiration:	Security Code:	
Signature:				Date:	
☐ Yes, my employe	will match donati	ons. Employer	Name:		
□ I would like to ma	ake this gift in (circl	e one) honor	/ memory of:		
□ Please acknowled	lge my gift in "I Ha	ve A Dream"-N	NY promotional	materials as follov	vs:
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Many thanks for your generosity!