



**Yes! I would like to support the humanitarian work of Operation Smile!**

Please print this form and complete the information, mail with your donation to:

**Operation Smile  
6435 Tidewater Drive  
Norfolk, VA 23509**

# Operation Smile

Changing Lives One Smile at a Time

Every child should be able to smile. With your help, we can reach all the kids who need us. Your gift can help heal them, offering a future filled with light and laughter.

**I want to give new smiles to waiting children!** Enclosed is my donation for:

- \$210     
  \$100     
  \$50     
  \$25     
  \$10     
  \$ \_\_\_\_\_

Please send receipt to:

Full Name (print): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Office) \_\_\_\_\_ (Cell) \_\_\_\_\_

E-Mail: \_\_\_\_\_

I have enclosed my check in US Dollars made payable to **Operation Smile**

Please charge my gift to:  Mastercard  Visa  American Express  Discover

Credit Card Number: \_\_\_\_\_ Expires: \_\_\_\_\_

Your Signature: \_\_\_\_\_

**Give Extra Smiles with Matching Gifts**

My employer has a matching gift program! Employer: \_\_\_\_\_

*Please enclose your matching gift form and employer contact information.*

**Join as a Monthly Smile Partner!**

Yes, I want to be a Smile Partner! Please charge my credit card in the amount of \$ \_\_\_\_\_ each month. I have provided my preferred credit card information above for my monthly Smile Partner donation.

Please charge my monthly gift on or about the 1<sup>st</sup> of each month

Please charge my monthly gift on or about the 15<sup>th</sup> of each month

*Note: You will receive monthly statements that include your Smile Partner giving history. You can call us at any time to increase or make a change in your Smile Partnership.*

**AXcdHUGa JY**

This gift is given  to  to \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Operation Smile is a 501(c)(3) organization. Contributions are tax deductible in accordance with IRS rules and regulations.

6435 Tidewater Drive ■ Norfolk, VA 23509 ■ PHONE 757.321.SMILE (7645) ■ FAX 757.321.7660  
www.operationsmile.org