



DONATE TODAY

INSTRUCTIONS

Please print out, complete the form, and fax to: 619-238-8777 or mail to:
CARE Program • c/oMoPA • 1649 El Prado • San Diego, CA 92101

LEVEL

- | | |
|--|---|
| <input type="checkbox"/> \$50
Purchases 5 disposable cameras | <input type="checkbox"/> \$100
Provides art supplies for one lesson |
| <input type="checkbox"/> \$200
Covers bus costs for field trips | <input type="checkbox"/> \$500
Pays for 30 teachers to participate in workshops |
| <input type="checkbox"/> \$1,000
Provides 3 student exhibitions | <input type="checkbox"/> \$2,500
Buys a 6-week residency program for 30 students |

INFORMATION

Name: _____

Address: _____

City / State / Zip: _____

Phone: _____

Email: _____

PAYMENT

Check enclosed \$ _____ Charge my credit card for \$ _____
(payable to MoPA) (Visa / Master Card)

Name as appears on card: _____

Card #: _____ Exp. Date: _____

Signature: _____

THANK YOU

The CARE program relies on contributions from generous donors like you!