

DONATION FORM

YES! I wish to be a part of the Community Empowerment Process......

Name:		
Address:		
Tel.: M	obile:	
E-mail:		
I wish to donate	/ sponsor:	
		a child with Disability. ol NAYEE- MUSKAAN.
□ Rs. 3000 for 1 ye	ear for the Education of	a child with single parent.
	onth towards Women onth towards Health s	Empowerment Program.
□ Rs. 2000 for 1 m □ Rs. 1500	□ Rs. 1000	
All donations are	Tax exempt U/S 80G	of I T Act 1961.
I PAY:		
By cheque/DD No),	Date
For Rs		
Drawn on Bank _		

Made in favour of "Vidya Vardhini Foundation Trust"