☐ Yes, I want to inspire girls to be <b>strong</b> , <b>smart</b> , <b>and bold</b> by making a gift today!	
Contact Information	
Name	
Spouse/Partner Name	
Address	
City, State, Zip	
Phone Emo	lic
Employer Information	
Your Employer	Spouse/Partner Employer
Name	Name
Address	Address
Phone	Phone
Email	Email
My employer will match this gift.	☐ My spouse/partner's employer will match this gift.
Please enclose matching gift form or contact your Human Resources office for more information.	
Gift Information	
One time gift of \$	☐ Monthly gift of \$
I am enclosing a check payable to GirlsInc.     of New Hampshire	Please charge the amount above to my credit card every month
<ul> <li>Please charge the amount above to my credit card</li> </ul>	Card Number
Card Number	Security CodeExp Date
Security CodeExp Date	Signature
Signature	
☐ This gift is in honor/memory of	
Please acknowledge (include name & address)	
$\square$ I would like more information on planned giving options, including gifts of retirement plans, remainder interest in property, bequests and others.	



