



Yes!
I want to help parents protect their children and keep them drug free.

Enclosed please find my gift of:

- Ambassador \$50,000 or any estate gift
Helps establish the Parent Corps in a school
- Guardian \$25,000
Helps support one Parent Leader
- Empowering Partner \$10,000
Helps provide a part-time parent leader
- Champion \$5,000
Helps provide independent community support
- Educator \$1,000
Helps train one Parent Leader
- Community Leader \$500
Helps open doors for community involvement
- Advocate \$100
Helps buy materials for one school
- Peer Partner \$50
Helps support a local parent group
- Other _____

Method of payment:

Check payable to National Families in Action

Visa

MasterCard

Name on the card: _____

Card # _____

Expiration date _____

Telephone _____

_() _____

Signature _____

Gifts are tax deductible to the full extent of the law.

Optional:

I would like to make this gift in honor/memory of:

Name: _____

Please indicate who you would like to receive notification of your tribute:

Name: _____

Address: _____

State: _____

Zip code: _____

Country: _____

The Parent Corps

Sponsored by National Families in Action , 2957 Clairmont Road, Suite 150, Atlanta, GA 30329
404-248-9676 – www.nationalfamilies.org

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