



For My Records

EIN# 47-0814125

I Donated: _____

On this Date: _____

We Appreciate Your Support!

Making a Difference Summer CAMPaign!

CAMP KINDLE'S MISSION

Our mission is to enhance the overall well being of young people infected with or affected by HIV/AIDS. A child's self-acceptance is often made more difficult by the challenges of HIV. Giving young people chances to succeed, learn and grow sends messages that they are special, unique and talented.

THANKS FOR HELPING!

Due to the financial stress this disease places on each family it affects, their limited funds do not allow many extra curricular activities. Because of this, we cover 100% of the costs in sending each young person to our camp. A large portion of our funding comes from individuals, like yourself, who want to Make a Difference in the life of a child living with HIV/AIDS. Because we are volunteer based, your gift will directly serve the youth of Camp Kindle.

It costs **\$1,000.00** to send a child to Camp Kindle for One Week.

This includes: Travel, Lodging, Food, Supplies, and anything else that child may need to enjoy a week full of fun, friends and hope.

Every dollar makes a difference...

- A Weeks Lodging for a Camper - **\$200.00**
- One Day at Camp for a Camper - **\$150.00**
- Feed an Entire Cabin a Meal - **\$50.00**
- A Campers Welcome Package - **\$25.00**
- A Campers Arts & Craft Supplies - **\$10.00**

Please send donation and form to:

Project Kindle c/o Camp Kindle,
28245 Ave Crocker, Suite 104,
Santa Clarita, CA 91355

Phone 877.800.CAMP (2267)
Fax 702.995.9186
kids@campkindle.org
www.campkindle.org

Camp Kindle is a 501(c)3 tax exempt organization.
All donations are tax deductible within the extent of the law.

****YOU CAN PRINT THIS PAGE, FILL OUT THE FORM AND SEND IT IN WITH YOUR DONATION!****

This donation is made:

In Honor of: _____

In Memory of: _____

Address: _____

City: _____ State: _____

Phone: _____ Zip: _____

Amount: \$ _____

- This is a one time donation
- Please charge my credit card once a month
- I Have Enclosed a Check!
- Credit Card: ___ Visa ___ MasterCard ___ Discover
- Card Number: _____ Exp. ____/____
- Signature: _____

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Phone: _____

Email Address: _____

please add me to your e-newsletter

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