



LEGACY OF CARING

Angels in the Woods

Helping women and children
in Dawson and Pickens
counties

Angels in the Woods Donation Form

Contributing Angel(s): _____

PRINT name(s) of all contributors as you want them to appear.

(e.g. if you and your spouse are contributing, please list both names)

Contribution: \$ _____ (Amount is Confidential and Tax Deductible)

___ I have an Alpha Box, or

___ My address is: _____

My phone number is: _____ - _____ - _____

If applicable, my contribution is:

In Honor of: _____

PRINT as you want name(s) to appear. If you wish, include sentiment on back of form.

In Memory of: _____

PRINT as you want name(s) to appear. If you wish, include sentiment on back of form.

Other Designation _____

Send a letter of acknowledgement to:

Name _____

___ Alpha Box or Address _____

Checks should be made to the **Big Canoe Chapel** and designated for **Angels in the Woods** on the check.

You may leave your donation check in the Chapel Office or Big Canoe Women's Guild Alpha Box or Mail to:

Angels in the Woods
Big Canoe Chapel Women's Guild *Legacy of Caring*
10530 Big Canoe
Big Canoe, GA 30143

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