



Yes! I want to assist the Healing Journey Foundation and make a gift of \$20 (or any amount you care to give) in celebration of the **20th Anniversary of the Foundation.**

\$20 _____

\$60 _____

\$100 _____

\$150 _____

\$500 _____

\$1000 _____

Other \$ _____

Please designate my gift to:

Area of greatest need _____

Programs _____

Symposiums _____

Newsletter _____

Other _____

I have remembered the Foundation in my will or through another planned gift. _____

Please contact me regarding estate planning and becoming a "Foundation Friend for the Journey."

Please send me more information regarding joining the "Sustainers Club" recurring gift program.

Payment Information

Credit Card _____

Credit Card Number:

Name as it appears on card:

Expiration Date:

Home Phone:

My Check is enclosed _____

Name:

Address:

City, State, Zip:

Email:

Thank You!

The Foundation is grateful for all gifts and your privacy is important.

I would like to remain anonymous _____ Remove my name from mailing list _____