



Inspiring freedom and independence in the lives of people with disabilities.

By choosing to donate to New Hope Center, you are taking an active role in inspiring freedom and independence in the lives of people with disabilities by creating opportunities that support, enrich, and empower their lives.

Please Select an Amount:

- \$500 \$250 \$100 \$50 \$25 Other
- One Time Monthly*
- It's okay to contact me in the future Please send more information about New Hope Center

Optional - Please direct my donation to:

- Where it is needed most General Fund Funding Gap Relief
- Made by M.E. Advocacy Other (Please explain)

Please Print:

Enclosed is my gift of \$ _____

Donor's name as it will be recognized: _____

Phone: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

You can provide a tax-deductible gift in memory of a loved one or in honor of a loved one.

This gift is made in

Honor of: _____

Memory of: _____

- No acknowledgement need be sent. Please send an acknowledgement to:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

**Please make check payable
and return to:** New Hope Center
443 Manhattan Street
PO Box 189
Chilton, WI 53014

For more information please call: (920) 849-9351

** Your monthly donation will fund all aspects of our work; from providing needed household items so a client can live in a home of their own, to funding equipment and supplies ensuring jobs, to sponsoring programs and outings to empower individuals with disabilities to increase their independence, self-worth, self-expression and physical and cognitive well-being.*