

2008 Holiday Cards Order Form



Donor Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

Payment Options:

Enclosed is a check for \$_____.
(Please make payable to Le Bonheur Children's Medical Center)

Visa/MasterCard/Discover/American Express (circle one)
Account Number _____ Expiration Date __/__/____
Amount \$ _____

Design Choices:

- | | | |
|---|---------------------------|---|
| A. Penguin Play | B. Christmas Carol | C. Angel |
| D. Winter Home | E. Happy Holidays | F. Holiday Hearts |
| G. Seasons Greetings (packaged cards only) | | H. Merry Christmas (packaged cards only) |

Donation Cards

- Design Choice A * _____ cards = \$ _____ (\$10 per card)
Design Choice B * _____ cards = \$ _____ (\$10 per card)
Design Choice C * _____ cards = \$ _____ (\$10 per card)
Design Choice D * _____ cards = \$ _____ (\$10 per card)
Design Choice E * _____ cards = \$ _____ (\$10 per card)
Design Choice F * _____ cards = \$ _____ (\$10 per card)

Please attach or email to Liz Salton at saltone@lebonheur.org the following information: Card design choice(s), personalized greeting and mailing list for the recipients to include name, address, and city/state/zip.

Packaged Cards – 12 Cards per package

- Design Choice A * _____ packages = \$ _____ (\$12 per package)
Design Choice B * _____ packages = \$ _____ (\$12 per package)
Design Choice C * _____ packages = \$ _____ (\$12 per package)
Design Choice D * _____ packages = \$ _____ (\$12 per package)
Design Choice E * _____ packages = \$ _____ (\$12 per package)
Design Choice F * _____ packages = \$ _____ (\$12 per package)

Variety Packaged Cards – 12 cards per package

- Design Choice G * _____ packages = \$ _____ (\$12 per package)
Design Choice H * _____ packages = \$ _____ (\$12 per package)

**Mail order form, list and donation to:
Holiday Cards, Attn. Liz Salton
Le Bonheur Foundation
P.O. Box 41817
Memphis, TN 38174**

Or Fax order form and mailing list to: 901-287-5999