

**ORDER FORM – My Gift Giving Shopping List to Benefit Children**  
**Please fill out BOTH sides of this form**

Item Number	Project	Quantity	Gift Card	Number of Cards	Unit Cost	Total Cost
6a	(EXAMPLE) Single Backpack	3	A	3	15.00	45.00
1	Train A Mentor				35.00	
2a	Camperships: One day of camp				75.00	
2b	Camperships: 1 week - overnight camp				250.00	
3	Mentoring Assistance Fund				25.00	
4a	Single Backpack				15.00	
4b	50 Backpacks				500.00	
5	Learning: Children's Books & Toys				20.00	
6	Children's Necessities				25.00	
7a	AASW Covenant Benefactor- 1 week				25.00	
7b	AASW Covenant Benefactor- 1 month				100.00	
7c	AASW Covenant Benefactor- 1 year				1200.00	
8	Grant Writing				75.00	
9a	Transporting Critical Goods-Maintenance				50.00	
9b	Transporting Critical Goods- Driver				100.00	
10	Furniture				40.00	
11	Endowment Fund					
	In Memory of					
	In Honor of					
<b>PAYMENT METHOD:</b>						
Name: _____						<b>Subtotal</b>
Street: _____						
City/State/Zip: _____						
Phone:(W) _____ (H) _____						<b>Shipping:</b> Charge of \$1.00 for total order mailed back to donor.
Email: _____						
<input type="checkbox"/> Check						<b>Total</b>
<input type="checkbox"/> Credit Card (circle one)    Visa    Master Card						
Card Number: _____						
Exp. Date: _____						
Signature: _____						
<b>Please make checks payable to and mail with this form to:</b> Covenant to Care for Children 120 Mountain Avenue, Suite 212 Bloomfield, CT 06002						<i>All designated gifts are tax deductible.</i>
<i>For office use only</i>						Date: _____

**COVENANT TO CARE FOR CHILDREN - ALTERNATIVE GIFT CATALOG**

**ORDERING INFORMATION:**

After making your gift selections on the reverse, enter your instructions below so CCC can fill your order. For each recipient, indicate name, address, item number(s), and type of gift card you would like sent:

**A** – Holiday      **B** – All occasion      **C** – Christmas

If CCC is to mail the card(s) to your recipient(s), be sure to indicate your message to each recipient, for example, "Love, Mom & Dad."

A description of your gift will be included with the card. If you wish, all the card(s) and description(s) can be mailed directly to you for mailing.

If you have questions, call the CCC office at (860) 243-1806.

1. Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Item #(s) \_\_\_\_\_ Gift Card Type \_\_\_\_  
Message \_\_\_\_\_

3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Item #(s) \_\_\_\_\_ Gift Card Type \_\_\_\_  
Message \_\_\_\_\_

2. Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Item #(s) \_\_\_\_\_ Gift Card Type \_\_\_\_  
Message \_\_\_\_\_

4. Name \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Item #(s) \_\_\_\_\_ Gift Card Type \_\_\_\_  
Message \_\_\_\_\_

If you are sending more than four gifts, please copy and use an additional page.