

Children OF Chornobyl Canadian Fund

Name _____

Address _____

City _____

Province _____

Postal Code _____

Enclosed is my gift of \$_____ to the Children Of Chornobyl Canadian Fund

for the support of:

CCCF Medical HUHTC CCCF/Dzherelo HUHTC-ATI

Scholarship project

On the occasion of: (please check the appropriate)

Birthday, Wedding Anniversary

Graduation

Opening of a Store, Medical or Legal Practice

Moving to a New Home

Recovery

Memorial

Other Occasions _____

If applicable, please send acknowledgement to:

Name _____

Address _____

City _____

Province _____

Postal Code _____