

# Wall of Hope®

**Breast Cancer Survivor's Project**

## THE ROLL BACK THE CAUSES CAMPAIGN

**Yes!** I support the Wall of Hope in educating people about cancer and the environment and publicizing the urgent need to roll back the use of toxic chemicals. Enclosed please find my tax-deductible donation at the following level:

Active \$25     Golden \$50     Pink Pearl \$75     Green Crystal \$100     Pink Crystal \$250     Other: \_\_\_\_\_

Your donation of \$25 or more entitles you to a one-year subscription to "The Green Breast Cancer Letter"

Your donation of \$100 or more entitles you to the FREE CD "A Thousand Eyes"

Your donation of \$250 or more entitles you to the FREE Pink Crystal Breast Cancer Ribbon

### My Information:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Donation is in honor of , or in memory of  : (send gift acknowledgement card?  Yes  No)

Name \_\_\_\_\_

Address \_\_\_\_\_

### Please send my free gift to:

- Myself, at the address shown at left  
 To the person listed below  
 Please do not send a free gift

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

### Payment Information:

- Enclosed is my check made payable to WALL OF HOPE for \$ \_\_\_\_\_  
Check Number \_\_\_\_\_

- Please charge my:    

In the amount of \$ \_\_\_\_\_

Card NO. \_\_\_\_\_

Expiration Date \_\_\_\_\_

**Mail Orders To:**  
Wall of Hope  
Breast Cancer Survivors' Project  
P.O.Box 2707  
Danville, CA 94526

Or

**Fax Orders to: 925.736-7112**