

Print this form, fill it in, and mail it with your check to the address below. Thank you!

_____ Friend \$25 _____ Donor \$50

_____ Sponsor \$100 _____ Other

Enclosed is my tax deductible contribution of \$ _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Mail this form with your check payable to EWPA to:

EWPA

96 Ocean Avenue

Cranston, RI 02905

Thank you!

The EWPA is a 501(c)(3) non-profit organization