

Yes! I want to help support Blind Service Association!

I would like to support BSA's programs:

With a one time gift of \$ _____

A recurring gift of \$ _____ Monthly Quarterly

I would like my gift to support the following program(s):

Reading and Recording Youth Program Senior Program

Employment Scholarship Support Groups

Guide Dog User's Group Where Most Needed

I want to light a Light of Love and Remembrance!

Number of lights being purchased:

_____ lights @ \$10 per light \$ _____

6 lights for \$50

(please indicate the names you would like to be honored/remembered on the back of this card)

Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

Payment Information: Check enclosed Please charge my credit card: Visa Mastercard Discover American Express

Card Number _____ Expiration _____ Code _____

Signature _____

YOU CAN ALSO MAKE YOUR GIFT ON-LINE AT: <http://blindserviceassociation.org/donate.html>

Save the paper and postage, I do not need a receipt. I prefer my receipt by e-mail.

Lights of Love & Remembrance

For a limited time we invite you to **recognize the special people in your life** by participating in our 23rd Annual Lights of Love and Remembrance Celebration which will take place on Thursday, December 16th on Facebook Live. **For just \$10 you can purchase a light from the string of lights that will decorate our office during this holiday season. Purchasing white lights will honor the memory of someone who continues to shine through you. Purchasing colored lights will honor those who today continue to light up your heart. For \$50 you can purchase six lights!**

When we receive your check, money order or online payment we will mail a card to you so you can add your own personal message before sending it to the person you are honoring or to the family of the person you are remembering. The card will indicate that a light was purchased in his/her memory or honor and will shine for 9 days. After the New Year, the list of those honored and remembered will be posted on our website at www.blindserviceassociation.org

Lights of Love and Remembrance

In honor of (colored light)

Names

In memory of (white light)

Names

Please send me _____ Holiday Light Cards to notify family or friends.
(quantity)