



HAWAII CHILDREN'S CANCER FOUNDATION

1814 Liliha Street • Honolulu, Hawaii 96817

Direct Line: 528-5161 • Fax: 521-4689

Hotline: 599-HCCF(4223) • To Call Toll-Free: 1-866-443-HCCF

www.hccf.org

Donation Form

Yes! I want to donate to Hawaii Children's Cancer Foundation! Please complete this form, and enclose it with your payment. Please submit to: Hawaii Children's Cancer Foundation; 1814 Liliha Street; Honolulu, HI 96817 (Please Print Clearly)

Name: _____

Address: _____

City, State, Zip Code: _____

Phone #: _____

Email Address: _____

Donate by check (Payable to HCCF)

Amount Enclosed: \$ _____

Donate by Credit Card

Please circle one: VISA MASTERCARD AMERICAN EXPRESS

Name on Card: _____

Card #: _____

Expiration Date: _____

Signature: _____

If your donation is in honor/memory of someone, please complete the following:

In Honor of: _____

In Memory of: _____

Please send an acknowledgement card to:

Name: _____

Address: _____

HCCF is a 501(c)(3) non profit organization. Your donation is tax deductible to the full extent of the law, and we Thank You! You will receive a return acknowledgement.

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