



## NEW YORK STATE CITIZENS' COALITION FOR CHILDREN, INC.

**Yes! I'd like to help every child find a permanent loving family**

Enclosed is \$25 for an individual membership

Enclosed is \$50 for a parent group membership

I'd like to join NYSCCC with an additional tax-deductible gift of \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City /State /Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Check  Visa  Master Card  American Express

Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

Mail To:

New York State Citizens' Coalition for Children, Inc.

501 Fourth Street, Brooklyn, NY 11215-3006