



**Yes, I would like to help the children of HOINA:**

My Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Country \_\_\_\_\_ Phone \_\_\_\_\_

Enclosed is my one time gift of:  
 \$25  \$50  Other

Please use it:  
 Where needed most  Christmas  
 Other (please specify:)  
\_\_\_\_\_

Enclosed is my first monthly gift of \$30 to sponsor a child.  
 I would like to sponsor \_\_\_\_\_.  
 Please choose a child for me.

Return form with check or money order payable to:

HOINA  
Post Office Box 636  
Brownstown, PA 17508-0636  
717-355-9494