



### Our Donation Form

Please make checks payable to *Wild Bird Rehab Haven* and mail to:

Wild Bird Rehab Haven  
PO Box 1897  
Kailua, HI 96734

*All contributions are tax-deductible*

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Amount of donation:   \_\_\_ \$15  
                                  \_\_\_ \$25  
                                  \_\_\_ \$50  
                                  \_\_\_ Other: \$ \_\_\_\_\_

First name: \_\_\_\_\_

Last name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

If you would like to receive our newsletter, please write your email address:

\_\_\_\_\_

May we contact you about volunteering with Wild Bird Rehab Haven? Yes/No