



PLEASE PRINT THIS FORM AND MAIL WITH YOUR DONATION TO:

**World Child Foundation,
Nick Silvestri Memorial Fund
207 Brookes Avenue, Gaithersburg, MD 20877**

Enclosed is my donation of \$ _____

Name _____

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If you wish that the Silvestri Family not acknowledge your generous donation please check here.

Return this form with your donation. You will receive a tax-deductible receipt.
Please make checks payable to:

World Child Foundation
207 Brookes Avenue, Gaithersburg, MD 20877



Your entire donation
will be allocated to
Orphanage Programs.