

# Yes, I'd like to buy a Lekotek Valentine!

Name:

Address:

City:

State:

Phone:

Email address:

*My Valentine*

To:

From:

Message:

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(Use back if more space is needed -- Maximum of 400 characters)

I have enclosed my donation in the amount of \_\_\_\_\_  
Please make checks payable to Lekotek of Georgia (\$5 minimum per Valentine)

Yes, I would like to be added to the mailing list to stay informed of what's happening at Lekotek of Georgia.

*Thank you!*

*Print and mail this form to:*  
Lekotek of Georgia  
1955 Cliff Valley Way, Suite 102  
Atlanta, GA 30329

