

___Yes, I would like to provide a \$600 Scholarship to one of the 2010 graduates of Crossroads Springs Institute for one year of Secondary School.

___No, I cannot provide a Scholarship at this time, but please accept my donation of \$_____ for the continued education and care of all the children at Crossroads Springs.

Tax deductible donation checks, payable to:
Crossroads Springs Africa, Inc.
can be sent to:

**Crossroads Springs/ Orchard Park Friends Meeting
c/o Clerk, 6924 E. Quaker Road, Orchard Park, NY 14127**

100% of cash or checks go directly to Crossroads Springs Institute.

Donor name: _____

Address: _____

City: _____ State: _____ Zip: _____

In memory of: _____

In honor of: _____