



Adopt-A-Family for the Holidays
Sponsor Wish List

SPONSOR INFORMATION:

Sponsor Name (Group or Individual): _____

Contact Name: _____

Telephone: Home _____ Work _____

E-mail Address: _____

Address: _____

City: _____ Zip Code: _____

Adoption Information

NOTE: Candlelighters' families are asked to request a maximum of three gifts totaling \$50 or less per family member .

Please check if you wish to: Purchase Gifts or Monetary Donation

Complete information below if purchasing gifts:

Number of Families to be Adopted: _____

Size of Family/Families to be Adopted: _____

Many of our families speak Spanish - are you able to adopt a Spanish speaking family? _____

If making a monetary donation please make check payable to *Candlelighters* and enclose your donation with the "Sponsor Wish List." Visa, Mastercard and American Express are accepted. Please call the Candlelighters' office at 713-270-4700 to donate by credit card.

Please mail or fax "Sponsor Wish List" to:
Candlelighters
8323 Southwest Freeway
Suite 435
Houston, Texas 77074
Fax: 713-270-9802

Candlelighters Childhood Cancer Family Alliance is a non-profit 501(c)(3) charitable organization. Your gift is tax deductible. Please contact the Candlelighters' office if you need a receipt.

Office Use Only			
Sponsor ID	_____	Family ID	_____
Treatment Ctr	_____	PC	_____