



Yes! I do care about people with disabilities and want them to have an opportunity to learn the skills to become as self-supporting and independent as possible. Enclosed is my contribution to Magic Valley Rehabilitation Services, Inc.

Please Check the Amount of Donation:

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- \$250.00 \$500.00 Other Amount: _____

Check Enclosed or

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Your Signature: _____

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MVR'S does not sell or share your information outside of the organization. By providing your email address you will help us to cut mailing costs by allowing us to send out our newsletters and other communications electronically.

Please print this form and mail it along with payment to:

**Magic Valley Rehabilitation Services
PO Box 189
Twin Falls, ID 83303-0189**