

# *Miss Deaf New Jersey Pageant*

## *Donation Form*

Name of Contact: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email address: \_\_\_\_\_@\_\_\_\_\_

Donation Amounts: (Please check the appropriate box)

\$50     \$100     \$250     \$500     \$1,000

Other (enter amount) \$\_\_\_\_\_

Please mail the completed form along with your generous donation (**payable to MDNJP**) to: MDNJP Treasurer, Roy Nunes, 2214 Central Avenue, Aberdeen, NJ 07747.

Or make the payment online "PayPal" here [www.njadeaf.org/mdnjp/Donate.html](http://www.njadeaf.org/mdnjp/Donate.html)

The Miss Deaf New Jersey Pageant is part of The New Jersey Association of the Deaf and is a Non-Profit Organization and the focal point of all cooperating agencies within the state in promoting the welfare of the Deaf in education measures, employment, and legislation. NJAD/MDNJP is a 501 ( c ) ( 3 ) organization.