



Donation Form

Enclosed is my tax-deductible gift to:

Maui Youth & Family Services **Aloha House** **Malama Family Recovery Center**
Please check one; if left unchecked, donation will go to the Aloha House, Inc. general fund to support all agencies.

Donation Amount: \$ _____

Your gift helps ensure everyone has the help they need to achieve
and maintain a foundation for lasting recovery and well-being.
Mahalo!

Name: _____

Please print name as you would like it to appear on acknowledgements. Please check here if you wish to remain anonymous:
We do not share our mailing list. All information is strictly confidential.

Address _____ City/State _____ Zip _____

Email _____ Phone _____

Donation Type (please check one):

Enclosed is my check Please charge my: Visa MasterCard

Card Number _____ Expires _____ CVV#: _____

Name as it appears on card _____

Signature _____

Donate Online

WWW.MBHR.ORG – click on **Donate Now**

Please mail this completed form to:

Maui Behavioral Health Resources Attn.: Development Director
Post Office Box 791749, Paia, Hawaii 96779

For more information please contact Development Director Malia Bohlin
Phone (808) 442-6566 mbohlin@aloha-house.org