



Compassionate Friends

of Myrtle Beach, SC

Waccamaw
Chapter



Love Donation

Please print clearly

Date: _____ / _____ / _____

Name: _____

Address: _____

City: _____ St: _____ Zip: _____

Day Phone: _____ Evening Phone: _____

Love Gift Enclosed: \$ _____ Make checks payable to The Compassionate Friends

Relationship to Child: _____

Child's Name: _____

Date of Birth: _____ Date of Death: _____

Please include my child(ren) as listed above in "Our Children Remembered" Yes ___ No ___
list as published in the newsletter and the website.

Print this form, fill it out and mail it to:

The Compassionate Friends of Myrtle Beach
c/o Jane Alirie
706 Bonnie Dr.
Myrtle Beach, SC 29588

If you have any questions or comments, please email Jane Alirie at angelinmyheartcf@aol.com