

## Yes ... I'd love to support Deaf Community Advocacy Network

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Enclosed please find my gift in the amount of:

\$15     \$50     \$100     \$200     \$200+     Other \$\_\_\_\_\_

Any gift \$200 or over receives a DEAF C.A.N.! T-Shirt

Please specify size: (circle one)        **S**        **M**        **L**        **XL**

I want to receive DEAF C.A.N.! News. Please add me to the mailing list.

*DEAF C.A.N.! is a 501(c)(3) tax-exempt organization. Contribution are tax deductible as permitted by law.  
Please make checks payable to DEAF C.A.N.! Thank you for your support.*

**Thank you for your support!**