

Invitation to Support the Community AIDS Quilt

I am interested in making or providing a panel for the Quilt. Please send more information.

I would volunteer to help make or set up a display of the Quilt.

I am interested in arranging for a display of the Quilt.

Enclosed is a donation to help continue the efforts of the Quilt.

Amount \$ _____
(checks payable to "Community AIDS Network")

Please print, complete form and return to:
Southwest Florida Community AIDS Quilt
c/o Community AIDS Network
1231 North Tuttle Avenue
Sarasota, FL 34237

Name

Address

City, State, Zip Code

Daytime Telephone (include area code)

Email Address