



Hep Tanzanian students and youth on the path to self-reliance!

- Student Sponsorships** (\$200/student/year, 5-year commitment suggested)

Quantity ____ x \$200 = \$ _____

Student Name(s) (if returning sponsor) _____

- General Fund Donation**

\$75 \$150 \$250 \$500 \$1,000 Other _____

TOTAL DONATION \$ _____

- Mr. Mrs. Ms. Miss Dr. Other

Name: _____

Address: _____

City, State, Zip: _____

Country: _____

Telephone: _____

Email: _____

- Credit Card** (select type) Visa MasterCard

Credit Card Number _____

Security Code (3 digit) _____ Expiration Date __/__/__

Name on Card (please print clearly) _____

Signature (required) _____

- Check enclosed payable to "Project Zawadi"**

- Employer match:**

Company name _____

Amount matched _____

- This donation in memory/honor of:** _____

Please notify (name and address or email): _____

Thank you for your generosity!

*Project Zawadi is recognized under section 501 (c) (3) of the Internal Revenue Code as a nonprofit organization. All contributions are tax-exempt to the full extent allowed by current IRS regulations. Project Zawadi is a will never share your personal information with third parties. Questions or comments? Call 866-589-6116 or email: donate@ProjectZawadi.org