

Donations

Donations of all kinds help our mission of reaching the youth before the drugs do.

I will support Your Choice-Live, Inc. with a contribution of \$_____

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Please make checks payable to Your Choice-Live, Inc.

Name: _____

Address: _____

City, State, Zip: _____

Phone/Email: _____

___ Please check here to remain anonymous. If this is not checked, your name/company name could be used as a donor/supporter on our website.

Send check and form to:

Your Choice-Live, Inc.
Attn: Ashleigh Nowakowski
1085 Saratoga Parkway
Oconomowoc, WI 53066

Thank you for your donation!