

Rainbow Friends
is a non-profit organization
caring for homeless animals



Rainbow Friends Animal Sanctuary
PO Box 1259,
Kurtistown, Hawaii 96760
(808) 982 5110
mail@rainbowfriends.org
www.rainbowfriends.org

Rainbow Friends, founded in 2000, was the first
“no-kill” sanctuary on the island of Hawaii.

We currently have 200 cats and 75 dogs
all looking for loving homes of their own.

Our mission is to help, heal, and find good homes for
abused, neglected, or otherwise homeless animals.

The cost of caring for them, including food,
housing, medicines and veterinary bills is
significant.

It costs almost \$30 a month to look after just one animal.

The Sanctuary is funded purely by the generosity
of others.

Please help us help the animals in our care by
setting up a recurring monthly donation straight
from your bank account.

We do not receive state or county grants.

Its easy! All you have to do is complete the
details below and return to us. We do the rest.

We are in desperate need of regular financial
support to allow us to continue the work we do.

And if you attach a voided check then you don't
even have to fill in the bank details - just tell us
how much you wish to donate and then sign!

Without regular funding we may not be able to
continue to care for Hawaii's homeless animals.

All contributions are tax-deductible.

We will send you a receipt at the end of the year.

Please complete the form below, detach and send to Rainbow Friends Animal Sanctuary, PO Box 1259, Kurtistown, HI 96760
If, in the future, you should wish to cancel, then just write and let us know. Please allow two weeks' notice of any cancellation.

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

Complete the following (please PRINT) and return to Rainbow Friends Animal Sanctuary, PO Box 1259, Kurtistown, HI 96760.

I authorize Rainbow Friends Animal Sanctuary to debit my bank account / credit card every month by the sum indicated below.

Name: _____
(on bank account or credit card)

Mailing Address: _____ City: _____ State: _____ Zip: _____

e-mail: _____ Phone Number: _____

Monthly Donation (\$): _____ Payment Method: (please circle) Bank Account / Credit or Debit Card

Signature: _____ Date: _____

Your bank information can be found on a check. Please enter all details here or attach a voided check to this form.

Bank Name: _____

Card Type: Visa / MC / Amex / Other _____

Branch: _____

Card Number: _____

City: _____ State: _____ Zip: _____

Expiration Date: _____

Routing Number: _____ Account Number: _____

Security Number: _____

This authorization will remain in effect until Rainbow Friends Animal Sanctuary receives written notification of termination.