

Collection Form

Name:	Age:
Address:	
City, State, Zip:	
Parent/Guardian Name:	
Parent/Guardian Email:	
Parent/Guardian Phone:	
Date of Lemonade Stand:	
How much did you raise for the pets? \$	

Please complete this form and mail with your donations to:

CHS, Jill Fowler, 701 Russell Road, Newington, CT 06111

Or bring this form with your donations to a CHS location:

701 Russell Road, Newington, CT
455 Post Road East, Westport, CT (call for appointment 860-594-4500 x6605)
169 Old Colchester Road, Quaker Hill, CT

Open Sunday through Saturday, 12 pm to 4:30 pm

Great Job! Thank you for making brighter futures for pets!

Parents, if you would like to see your child's lemonade stand photo on social media or in print, please send a photo to marketing@CThumane.org. Confirm parental approval for publishing photo in your email.

Questions? Contact jfowler@CThumane.org or call 860.594.4500 x6305

www.CThumane.org/lemonade

For office use: Received Date: Received by: