



**Minnesota Organization on Adolescent
Pregnancy, Prevention and Parenting**

**1619 Dayton Avenue, Suite 111 St. Paul, MN 55104
651-644-1447 or 800-657-3697
www.moappp.org**

YES! I want to participate in Macy's Shop For A Cause Day
to benefit the programs and services of MOAPPP

_____ total # of shopping passes at \$5 each (distribute them to friends and family!)

_____ total \$ amount of donation

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Payment can be made by check (payable to MOAPPP) or by credit card*:

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Account # _____

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Name and address on the card if different than above:

*Please be advised that your credit card donation will appear on your credit card statement as *Charitybox.com*.
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