



## SPONSORSHIP FORM

Thank you for your interest in sponsoring a new mom with diapers for six months! Please fill out this form and email it to [m@gotozoe.org](mailto:m@gotozoe.org), or mail it to: ZoeCare, 2251 W. Kagy Blvd. #2, Bozeman, MT 59718. Once this sponsorship form has been processed, you will be contacted with confirmation and an instruction sheet. Any questions can be directed to Jeanine Allen, ZoeCare's Mom2Mom Director, at (406) 586-9444.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_

How many new moms do you want to sponsor? \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_