



Your **Box of Joy**® may be the only Christmas gift a poor child receives!



Please fill out the form below and place it — along with a donation (\$9 for each Box of Joy) — in an envelope. Place the envelope inside the box on TOP of gifts.

For more information about where to mail/drop off your box, go to boxofjoy.org/dropoffcenters

Include \$9 for each Box of Joy (one check per family is okay) along with this form, or you can give online at boxofjoy.org. In addition to covering the shipping and handling of your Box of Joy from the Drop-off Center to the destination country, a portion of this contribution supports the Catholic ministries serving in the child's community, enabling the ministries to have a greater impact on the lives of the poor!

For an official Boy/Girl box label, visit our Resources page at boxofjoy.org/dropoffcenters

Please share your prayer intentions: _____

All donations will be used for the Box of Joy program. If more donations are received than needed for the Box of Joy program, the excess funds will be used to meet the most urgent needs of the ministry.

This was produced by Cross Catholic Outreach, Inc. which is recognized as a tax exempt organization under IRC § 501(c)(3). Our principal office is 2700 N. Military Trail, Suite 300, PO Box 273908, Boca Raton, FL 33427-3908, Tel: 561-392-9212. Contributions to Cross Catholic Outreach, Inc. are tax deductible for federal income tax purposes. Requests for copies of recent financial statements or other information may be directed to Compliance Officer at the address and telephone number listed above. **PRIVACY POLICY:** YOUR NAME, ADDRESS AND OTHER INFORMATION IS HELD IN CONFIDENCE BY OUR MINISTRY AND WILL NEVER BE SOLD, RENTED OR GIVEN TO ANY OTHER MINISTRY OR ORGANIZATION.



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boxofjoy.org • boxofjoy@crosscatholic.org • 800-914-2420 ext. 142

Yes, I want to send Boxes of Joy! Please accept my gift of: \$ _____

Please complete the following information for your gift. Checks should be made payable to **Cross Catholic Outreach**.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____
(PLEASE PRINT CLEARLY)

Credit Card Number

Exp. Date

Signature: _____

We hope you enjoy receiving ministry information and updates from Cross Catholic Outreach via email. If you do not wish to receive these email messages from us, please check this box:

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