

MD5M Lions KidSight Foundation, Inc

Sight Saver Award

MD5M Lions KidSight program is designed to provide free vision screening to children with the goal of detecting common eye disorders especially those that could lead to Amblyopia or commonly called “lazy eye”

The ability to see clearly can impact many aspects of a child’s development. Success in school and athletics, as well as social interaction.

The MD5M Lions KidSight “Sight Saver” award is an excellent way to honor an exceptional Lion, Lioness, Leo or non-Lion individuals and organizations who have distinguished themselves on behalf of children’s vision.

A \$1,000 U.S. donation to the MD5M Lions KidSight Foundation, Inc allows the donor to present a Sight Saver Award. The award recipient receives a beautiful plaque and pin. Both the donor and recipient have the satisfaction of supporting children’s vision screening.

Donations help support the MD5M Lions KidSight program.

- **Allow 4 weeks for plaque delivery**
- The exact name and spelling will be used for the recipient’s plaque. Write as neatly as possible!!!
- Make check payable to the MD5M Lions KidSight Foundation, Inc
- (Find the application on the next page.)



MD5M Lions KidSight Foundation, Inc Sight Saver Award Application



Recipient's Name _____

IMPORTANT! Please print clearly name exactly as it should appear on plaque.

Recipient's address _____

Number and street name, apartment number, post office box

City, State, or Province, Postal Code

Lion affiliation of Recipient (if any) _____

Is this Sight Saver Award a memorial? Yes _____ No _____

Is the recipient to be named later? Yes _____ No _____

This donation is from (check one): Individual__ Club__ District__

Other _____

Club Name _____ Lions District _____

Donor/Contact Name _____

Donor/Contact Address _____

Donor/Contact City, State, Province, Postal Code _____

Donor/Contact Email Address _____

Please print name, complete address, phone number and email address of the person to whom the plaque is to be sent for presentation to the recipient.

Note! The plaques are sent via UPS and cannot be delivered to a PO Box

Name _____

Street Address _____

City, State or Province, Postal Code _____

Email Address _____ Phone _____

Please enclose a check, bank draft, or money order payable to MD5M Lions KidSight Foundation, Inc for U.S. \$1,000.

Mail completed form to:

Lion Debra Johnson

PO Box 128, Big Lake, MN 55309

KidSightMD5M.Treasurer@gmail.com