

Helping Hands of Chatham

for those experiencing insecurity as a result of COVID-19

Date: mm/dd/yy			
Student's School: _			
Dear Parent or Gua Please indicate wh project by checking	ether or not you wish to allow you	r childto pa gn your name and email to <u>HelpingHa</u>	articipate in this service andsofChatham@gmail.com.
I grant permission for my child to participate in name and brief description name			
I do not grant permission for my child to participate in service project.			name of
Signature of Paren Parent's email:	t/Guardian	Printed Parent/Guardian Name	
Printed Name of Cl		Date	
# of Community s	ervice hours		

Helping Hands, NJ 501c3 application update – although we are on track in the process, we continue to work on our nonprofit status with the IRS. Tax-exempt organizations generally must provide the donor with an acknowledgement (without stating the value of the donation) to enable donors to claim the tax deduction. In keeping with our culture of transparency, so that a climate of openness guides our organization's mission, we are required to disclose that Helping Hands, NJ is not in a position to offer our contributors a tax-deductible donation receipt at this time, updated 11/2023.