



Sammy's Friends
Foundation

Therapy Rebate Coupon Instructions

1. Fill out the required information on the coupon below.
2. Please consider providing a photo of your child for our website and/or Facebook for testimonial and fundraising purposes. While this does not affect the processing of your coupon, your feedback helps us as a foundation and keeps us going!
3. Mail the completed coupon together with your paid therapy receipt, proving that you have already paid the therapist.
4. If we can fund you, we will send a check payable to the name on the coupon below.
5. Please note that it can take two to three weeks before you receive your check.
6. Email us at Info@SammysFriendsFoundation.org with any questions or concerns.



Sammy's Friends Foundation Developmental Therapy Coupon



Child's Name: _____ Check Payable Name: _____

Relationship to the Child: _____

Mailing Address:

Phone: _____

Email: _____

Would you provide a recent photo of your child for fundraising purposes? *Circle one:* Yes No

Would you be willing to write a brief testimonial for our website & Facebook page? *Circle one:* Yes No

If you prefer to have your therapist/facility mail your filled coupon, please initial here: _____

Developmental Therapist & Facility: _____

Please mail this coupon together with your paid therapy billing statement to:

Sammy's Friends Foundation
PO Box 344, Madison, NJ 07940

Find us at: SammysFriends.org | [Facebook.com/SammysFriendsFoundation](https://www.facebook.com/SammysFriendsFoundation)

SFF supports: MNRI® | CME at Novogrow.com | Hippo Therapy at SpecialStrides.com