



**2012 FORGOTTEN FRIENDS FRIENDSHIP DRIVE**

[www.forgottenfriendsoflongisland.org](http://www.forgottenfriendsoflongisland.org)

Dear **FRIENDS**,

As many of you know, Forgotten Friends of Long Island Animal Rescue is a non-profit, 501(c) (3) Charitable organization dedicated to saving those shelter animals overlooked by both the general public and other rescue groups. The animals we rescue are sick, malnourished, elderly, discarded and ready to be euthanized. In 2011, we rescued, rehabilitated and found forever homes for over 100 dogs and cats.

**The number of homeless dogs and cats needing help from our organization is constantly increasing.** Forgotten Friends takes these dogs and cats into our foster care program, where they can be loved and cared for in a warm environment until a permanent, adoptive home can be found.

Forgotten Friends provides **ALL** veterinary care, including vaccinations, heartworm tests and treatment, specialized surgery, deworming and spaying or neutering. Because the cost for proper medical treatment continues to rise, *more than ever* we need your help to continue our mission of helping those animals that are *sadly forgotten*.

**ALL** monies raised by Forgotten Friends, whether from adoption fees, donations or fundraisers are **ALL** used for the animals we rescue. Forgotten Friends is an **ALL VOLUNTEER** organization and has **NO PAID STAFF**.

We invite *you* to become a member of our caring organization during our **2012 FRIENDSHIP DRIVE**.

Please *join* Forgotten Friends of Long Island so that we can continue to help our best friends.

Thank you very much for your generosity and support.

Loretta Rinaldo, President

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Please complete and return this form with your check to: **Forgotten Friends of Long Island**  
**P.O. Box 710, Plainview, New York 11803**

\_\_\_\_\_ \$15.00 - Individual Friend  
\_\_\_\_\_ \$20.00 - Family Friend  
\_\_\_\_\_ \$10.00 - Senior Friend (over 65)/ Student Friend  
\_\_\_\_\_ \$ Additional voluntary contribution for rescue/rehabilitation efforts  
\_\_\_\_\_ \$ TOTAL AMOUNT ENCLOSED

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ (street, city, state, zip)  
TELEPHONE \_\_\_\_\_ E-mail \_\_\_\_\_

QUESTIONS? Please call Carol at (631) 643- 2284