

Grand Children's Corner

Please complete this form and enclose a photograph of your grandchild. The photograph and information will be posted on the GMCANA web site at www.gmcana.com

Information about your grandchild:

First: _____ Middle: _____ Last: _____

Date of Birth: _____ Sex: _____

Mother's Name: _____ Father's Name: _____

Your Name: _____

GMC Alumni: Yes _____ No _____ Year of joining GMC: 19 _____

Comments: _____

Please write a check of \$100.00 or more, payable to "GMCANA" for each grandchild and enclose a color picture with this form. Your donation is tax deductible and I will assure you that your contribution will bring happiness and joy to you, needy children and their grandparents.

Mail your check to: Das S. Kanuru, M.D.
1100 Bldg., Suite 100
S. Jackson Hwy.
Sheffield, AL 35660

Thank you very much,

Srihari Das Kanuru, M.D
Tel: 256-386-4300—office
Tel: 256-383 -4332 –home
Fax: 256-314-4472
E-Mail: sdkanuru@hiwaay.net

P.S. Your donation is not mandatory to have your grandchild's picture shared by other grandparents of our friends. Please send the data and details irrespective of your contribution. It is part of association's effort to maintain meaningful alumni to be shared and cherished.