

**Crossroads Pregnancy Center**  
**“Change for Life” Baby Bottle Drive**

Name of Church \_\_\_\_\_

Liaison Name \_\_\_\_\_

Phone \_\_\_\_\_

**Please circle your preference:**

**January**

**February**

**March**

**April**

**May**

**June**

**July**

**August**

**September**

**October**

**November**

**December**

**Please return to :**

**Crossroads Pregnancy Center**  
**3205 South Boulevard**  
**Auburn Hills, MI 48326**  
**Attn: Event Coordinator**