empowerHER® was formed in 2013 with a very specific mission—to empower, support and connect girls and young women who have experienced the loss of their mothers. Founder Cara Belvin was nine years old when her mother died of breast cancer and formed empowerHER after a recognized need in the community to support this vulnerable population.

empowerHER is a true pioneer in children’s bereavement and serves girls of mother loss in a community-based, non-therapeutic and volunteer-driven model. We operate with a lean staff and 300+ volunteers, our low overhead keeps all programs at no cost to the family.

With year-round programming, empowerHER EVENTS for GIRLS build a supportive community and remind girls they are not alone in their grief. Our 1:1 MENTOR MATCH PROGRAM provides positive role models and year-round support.

“My mom died suddenly when I was 14. After her death, I stayed strong in front of everyone but over the past couple months I’ve cried myself to sleep almost every night and have had no motivation to do anything. I’m not a big fan of counseling or therapy. empowerHER is a great opportunity to meet people who have experienced this same loss.”

Maddie, age 17

Why empowerHER?

CHILDHOOD BEREAVEMENT is more common than people realize, and it is estimated that 10 million young people experience the death of a parent each year. For most young girls, their mother is the most influential figure in her life. The loss of this maternal compass leaves daughters feeling isolated and “different” from their peers.

3 GRIEF-CARE PROTECTIVE FACTORS essential for healthy development include: Caring Community, Positive Role Models, & Peer Support. Loss during childhood often results in profound stress, adversity and without appropriate support, the derailment of a young girl’s development. Access to these 3 grief-care protective factors is essential.

Adapted from Harvard University Center on the Developing Child 2018, Retrieved and adapted from https://www.judishouse/cbern

BE A PART OF OUR STORY
www.empoweringher.org | 617-648-9559

info@empoweringher.org | 137 Washington Street, Norwell, MA 02061 | FOLLOW US 🌟
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empowerHER® FOUNDERS are transformational for our young organization. empowerHER has a clear and concise expansion plan for Chapters across the country. Become a FOUNDER today and help meet an unmet need in your community. Today, girls are alone in their grief but it doesn’t have to be that way.

Our FOUNDERS Program recognizes all donors who support empowerHER with $1,000 or more in unrestricted fiscal gifts within a calendar year.

We offer the following benefits for your generous partnership:

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<th>FOUNDER Benefits</th>
<th>CHAMPION $25,000</th>
<th>TRAILBLAZER $15,000</th>
<th>LEGACY $10,000</th>
<th>VISIONARY $5,000</th>
<th>INNOVATOR $2,500</th>
<th>FRIEND $1,000</th>
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<td>Custom program that aligns with your firm’s marketing strategy</td>
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<td>Prominent Recognition on the empowerHER FOUNDER webpage</td>
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<td>Exclusive empowerHER FOUNDER tote bag</td>
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**FOUNDERS PLEDGE CARD**

Company/Individual’s Name: ________________________________  
(As they should appear in print)

Contact Person(s): ________________________________________

Address: ________________________________________________

City: _____________________________  State: _______  Zip: ____________

Phone: ___________________________  Email: _____________________

Website: ________________________________________________

I/We hereby pledge to empowerHER® the following gift:

1. Total Annual Gift of $ __________________________

2. If applicable, this gift will be payable over ____ annual installments of _________ to empowerHER®

3. Payment options:
   - [ ] Cash/Check enclosed (payable to empowerHER)
   - [ ] Credit Card:  [ ] Monthly  [ ] One-time Charge
   - [ ] Card # ___________________________  Exp Date ____ / _____  CSV Code ________

4. Gift to be Acknowledged by: (Please choose one)
   - [ ] Company Name (as it should appear in print)
       ___________________________________________________________
   - [ ] Individual Name (as it should appear in print)
       ___________________________________________________________
   - [ ] Anonymous

5. My gift is in honor of or in memory of:

   ___________________________________________________________

6. My company will match my gift. (Please send paperwork to the address below)

   Donor’s Signature: _______________________________  Date: ____________

   Company/Individual’s Name: ________________________________
   (As they should appear in print)

   Contact Person(s): ________________________________________

   Address: ________________________________________________

   City: _____________________________  State: _______  Zip: ____________

   Phone: ___________________________  Email: _____________________

   Website: ________________________________________________