



Brethren Village Retirement Community 2011-2012 Annual Appeal Contribution Form

DONOR INFORMATION (Please Print or Type)

First Name	
Last Name	
Address 1	
Address 2	
City	
State	
Zip/Postal Code	
Daytime Phone	
Evening Phone	
Email Address:	

PARTNERSHIP INFORMATION

Please Check One	<input type="checkbox"/> \$2,500 <input type="checkbox"/> \$1000 <input type="checkbox"/> \$500 <input type="checkbox"/> \$250 <input type="checkbox"/> \$100 <input type="checkbox"/> Other- _____
Please Check One	<input type="checkbox"/> Cash <input type="checkbox"/> Check (Check Payable to: Brethren Village Retirement Community) <input type="checkbox"/> Credit (VISA or Mastercard)
Please Direct My Gift To	<input type="checkbox"/> Good Samaritan Fund- annually provides benevolent care to Residents who have exhausted their financial resources <input type="checkbox"/> Endowment Fund- the earnings generated by this fund provide a source of continuing financial support for benevolent care

CREDIT CARD INFORMATION

First Name	
Last Name	
Address 1	
Address 2	
City, State	
Zip/Postal Code	
Card Type (VISA or Mastercard)	
Card Number	
Card Verification Number (last 3 digits above signature strip)	
Expiration Date (Month/Year)	
Authorizing Signature	
Card Owner Phone Number	

For further information or to mail in your donation:
 Brethren Village, Attn: Development Department
 3001 Lititz Pike, P.O. Box 5093, Lancaster, PA 17606-5093
 Telephone: 717-581-4316 ~ Facsimile: 717-581-4300 ~ Toll Free: 1-800-367-9899
 Email: giving@bv.org