

**WAVERLY COMMUNITY HOUSE, INC.
ANNUAL SUSTAINING FUND DRIVE**

NAME: _____

(Name as you wish it to appear in public acknowledgement. Check below if you wish to remain anonymous. Thank you.)

ADDRESS _____

CITY _____ STATE _____ ZIP _____

E-MAIL _____ PHONE _____

We respect your privacy and will not share your contact information with third parties.

Giving levels are as follows:

____ Margaretta E. Belin Society—\$1,000 and above

____ Trustees' Circle—\$200-\$299

____ Founder's Circle—\$500-\$999

____ Patrons—\$100-\$199

____ President's Circle—\$300-\$499

____ Friends—up to \$99

____ *I do not wish to have my gift publicly acknowledged in the Comm's newsletter.*

We are grateful for your generosity.

____ **Yes, I would like to donate \$_____ to the Sustaining Fund.** My check for \$_____ is enclosed.

____ **Yes, I would like to pledge \$_____.**

Please bill me on _____, 20_____

or payable in _____ installments.

Matching Gift: I have filed for a matching gift from my employer.

Securities Gift: To make a gift of securities, please call 570-586-8191, extension 3

Bill my: VISA MasterCard

Amount: \$_____

Card No.: _____

Expiration Date: _____

Signature: _____

Contributions are tax deductible within the limits of the law. The official registration and financial information of Waverly Community House, Inc. may be obtained from the Pennsylvania Department of State by calling toll free, within Pennsylvania: 800-732-0999.

Registration does not imply endorsement.

Please make checks payable to: Waverly Community House, Inc.

**WAVERLY COMMUNITY HOUSE, INC.
1115 N Abington Road
P O Box 142
Waverly PA 18471**