



To make a donation, please
Complete this form and mail to:
WRC Senior Services
985 Route 28
Brookville, PA 15825

Enclosed is my gift of:

\$50 \$100 \$250 \$500 \$1,000 Other: _____

Please direct my gift to:

Charitable Care Fund Resident Life Enhancement Where Needed Most

At this community:

Wherever needed most Edgewood Heights
 Highland Oaks Ridgmont
 Laurelbrooke Personal Care In Home Solutions *PLUS*
 McKinley Health Center at Laurelbrooke Landing

My gift is

In honor of: _____

In memory of: _____

Please send an acknowledgement of this gift to:

Name: _____

Address: _____

My gift is made by

Enclosed check (payable to WRC Senior Services) Master Card Visa

Name on Credit Card: _____

Credit Card Number _____

Expiration Date: _____ Verification #: _____

Signature: _____

My Information:

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____ Email: _____

I have included WRC Senior Services in my estate plans.

Please send me information on how to include WRC in my estate plan.