

Cayuga Addiction Recovery Services Donation Form

Name

Address

Telephone

E-mail Address

Please tell us how you would like us to apply your tax deductible donation by selecting one of the four options below.

CARS Client Recreation Fund

Family Rebuilding program

Other Donation Request: Please specify below

Other Donation

Client Educational Programming Options

Other donation request please apply my donation as follows:

Please let us know how much you would like to donate by choosing an amount below:

\$25.00

\$50.00

\$100.00

\$150.00

Other Amount:

Please select a payment option below

Personal
Check

Credit Card Type:

Visa

Master Card

Discover

Expiration
Date:

Credit Card Account Number:

Please Print this form and sign your name below:

Please print this form, and mail your check to the address below. If you wish to pay by credit card you can also E-mail your donation form and credit card information to rbrashear@carsny.org.

Thank you for your generous donation in support of Cayuga Addiction Recovery Services and our clients.

Cayuga Addiction Recovery Services, P.O. Box 724, Trumansburg, NY 14886.

Phone:(607)387-5535 ext. 15.