

Friend of



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(913) 728-2881

2010 APPLICATION

Friend Level (check one):

- Individual \$25, Advocate \$250, Youth (< 18) \$15, Family \$60, Champion \$500, Senior \$15, Supporter \$125, Benefactor \$1000

Name: First MI Last

Address: City State Zip

Phone: Home Cell

E-mail:

Please tell us a little about yourself:

Occupation of Member(s): Name Occupation Name Occupation

Pets:

Do you have particular talents you are willing to provide to LCHS?

- Construction, type: Accounting Attorney Public speaking Public relations / advertising Other

I'd like to help LCHS with these efforts(check all that apply):

- Humane Education Foster Publicity Fund-raising Newsletter Advocacy Other:

Please send me information about planned giving.

(signature) /2010