



New Member Enrollment Form

Sign me up as an annual member of the Comfort Circle! Use my support to sustain daily care at Clarehouse and ensure that comfort is available around the clock for dying people in need.

- \$1200 Comfort Circle*
- \$2400 Inner Circle*
- I cannot commit right now, but please accept my gift of \$_____.*

- My check is enclosed.*
- I would like to give monthly.*
 - Please contact me about automatic withdrawal from my bank account.*
- My company has a matching gift program.*

Name: _____

Phone: _____

Email: _____