



Donate Now!

Please accept my contribution to CPARC to support individuals with special needs:

Please Check Method of Payment:

Check

MasterCard

Visa

Send Bill

Name as it appears on Credit Card: _____

Card #: _____ Expiration Date: _____

Signature: _____ Donor Name: _____

Phone #: _____ Email: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Please check any of the following statements that may apply:

- Please keep my contribution anonymous.
- Please send me more information about CPARC's Services.
- I am interested in touring CPARC's Services.
- I am interested in obtaining information on Planned Giving.
- I would like a Volunteer Form sent to me.

Please send this form with payment to:

**CPARC
71 Ashland Avenue
Carlisle, PA 17013
Attn: Community Developer**

"A copy of the official registration and financial information of Cumberland-Perry Association for Retarded Citizens may be obtained from the PA Department of State by calling toll free, within Pennsylvania, 1-800-732-0999. Registration does not imply endorsement."