

## ANGEL SOCIETY MEMBERSHIP FORM

**You are invited to become a new member or advance your existing membership supporting the Sisters' mission of loving and compassionate care to the frail, elderly, poor and terminally ill residents.**

Yes, I/we accept your invitation. Enclosed is our 2016 Angel Society gift of \$\_\_\_\_\_:

- |                          |                |                     |
|--------------------------|----------------|---------------------|
| <input type="checkbox"/> | Pearl Wings    | \$150 - \$499       |
| <input type="checkbox"/> | Crystal Wings  | \$500 - \$999       |
| <input type="checkbox"/> | Silver Wings   | \$1,000 - \$4,999   |
| <input type="checkbox"/> | Gold Wings     | \$5,000 - \$9,999   |
| <input type="checkbox"/> | Platinum Wings | \$10,000 - \$24,999 |
| <input type="checkbox"/> | Diamond Wings  | \$25,000+           |

Please dedicate my gift:  In Honor of  In Memory of:

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### RECOGNITION

Please print your name preference to be engraved on the 2016 Angel Society Donor Wall:

- 
- I prefer that my contribution remain anonymous.

### PAYMENT

- My check made payable to Mary Health of the Sick is enclosed.
- I would like to pay by credit card (please complete information on back)

**THANK YOU FOR YOUR MEMBERSHIP IN THE MARY HEALTH ANGEL SOCIETY**

#### Credit Card Payment

Charge my  Visa  MasterCard

Credit Card Number: \_\_\_\_\_ CVC Code \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Print Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Signature \_\_\_\_\_

2929 Theresa Dr., Newbury Park, CA  
805-498-3644 (O) 805-498-5112 (F) [www.maryhealth.com](http://www.maryhealth.com)

For more information on The Mary Health Angel Society, please contact  
Kathy Tamashiro, Development Director at 805-498-6795 or [development@maryhealth](mailto:development@maryhealth)