



**Yes! I want to make a difference and join the Circle of Support.**

*I would like to join at the following level:*

- GOLD (\$100 per month)
- SILVER (\$50 per month)
- BRONZE (\$25 per month)
- PURPLE (\$10 per month)

*I would like to pay:*

- Monthly
- Semi-annually
- Annually

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Please return to :**

**The Laurel Center**

**PO Box 14**

**Winchester, VA 22604**