

Instructions

Simply click the underlined link above to download the form to your computer screen. The PDF form may be printed out first and completed by hand. Please make sure that the form is printed out and completed in its entirety before submitting it to Casa. The form cannot be submitted online. To submit the Circle of Care Membership Form, please fax it to Casa at **(602) 254-2466** or mail it to: **Casa, 77 East Thomas Road, Suite 112, Phoenix, AZ 85012**. Thank you.

Casa's Circle of Care

Casa's **Circle of Care** is a partnership of individuals and organizations dedicated to supporting Casa's mission of preventing the spread of abuse and violence. New members are encouraged to join Casa's **Circle of Care** campaign through the Leader's Circle, the Partner's Circle, the Patron's Circle, or the Supporter's Circle. Donation amounts for each **Circle of Care** are provided below. While anyone can contribute to Casa's mission through a donation of any amount, becoming a **Circle of Care** member requires a commitment of support.

Leader's Circle -	\$10,000 +
Partner's Circle-	\$ 5,000 - \$ 9,000
Patron's Circle -	\$ 1,000 - \$ 4,999
Supporter's Circle -	\$ 100 - \$ 999

To become a **Circle of Care** member please fill out this membership form. The PDF form may be printed out first and completed by hand. Please make sure that the form is printed out and completed in its entirety before submitting it to Casa. The form cannot be submitted online. To submit the **Circle of Care** Membership Form, please follow the instructions at the bottom of the page.

Please indicate your level of membership:

- Leader's Circle - \$10,000 +
- Partner's Circle- \$ 5,000 - \$ 9,000
- Patron's Circle - \$ 1,000 - \$ 4,999
- Supporter's Circle - \$ 100 - \$ 999

OR

I would like to make a contribution of \$ _____

- Which I will pay in full now, or

- Which I will make with _____ (number of) payments over _____ months until my pledge is met in full.

Contributions are tax deductible as provided by law. Casa is an Arizona-based 501(c)(3) non-profit social service agency.

To become a **Circle of Care** member, please fill out the following information:

Name

Phone

Home Address

City

State

Zip Code

Email Address

If paying by check, please fill in the amount of your check: \$ _____
Please make all checks payable to Casa.

If paying by credit card, please indicate the card you are using and fill out the required information:

Visa

Mastercard

American Express

Card No.

Expiration Date

Your name as it appears on the card

Your signature

Date

Please print out this two-page form, fill it in completely, and send it to Casa by:

a. Fax: **(602) 254-2466** or

b. Mail: **Casa, 77 East Thomas Road, Suite 112, Phoenix, AZ 85012**

Thank you for your interest in Casa and its services to the community.