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Place  
Stamp  
Here

Thank You!

SAGE Eldercare  
Office of Development  
290 Broad Street  
Summit, NJ 07901

## YES, I want to support the SAGE Eldercare Annual Fund!

Name (as you wish to be listed in the annual report)

Check here if you prefer to be anonymous.

Address

City, State, Zip

Phone

E-mail

*All gifts are tax-deductible as permitted by law. Information filed with the Attorney General concerning this charitable solicitation may be obtained from the Attorney General of the State of New Jersey by calling (973) 504-6215. Registration with the Attorney General does not imply endorsement.*

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Enclosed is my check for \$\_\_\_\_\_ made payable to SAGE Eldercare.

Please charge \$\_\_\_\_\_ to my  Visa  MasterCard  American Express

Account # \_\_\_\_\_ Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Name as it appears on card \_\_\_\_\_

I am affiliated with a matching gift company. I have enclosed the completed forms.

### Membership Levels

Please enroll me as a member of the 1954 Society

Star (\$5,000 and above)  Patron (\$1,500 – 2,499)  Associate (\$500 – 999)

Benefactor (\$2,500 – 4,999)  Sustainer (\$1,000 – 1,499)

I would like to make a gift of appreciated securities and will contact the Development Office.

I would like information about remembering SAGE in my will.

I am interested in volunteer opportunities.

Thank you for your thoughtful support!