



MEMBER INFORMATION

(as it should appear in print)

First Name

Last Name

Address

City

State

Zip

Preferred Phone

Preferred Email

Company

Title

Date of Birth

Thank you for your support!

As a 501c(3) not-for-profit organization, your donations are tax deductible to the fullest extent allowed by law.

Grace House Akron, Inc.

The Circle of Love Membership Form

MEMBERSHIP TIERS

(please select one)

- ☐ **Young Professional: \$1,000**
Year-by-year commitment, must be under the age of 39
- ☐ **Annual Member: \$2,500/year**
Year-by-year commitment
- ☐ **Comfort Member: \$7,500** (3+ year pledge)
Multi-year pledge demonstrating long-term commitment
- ☐ **Dignity Member: \$12,500** (5+ year pledge)
Premier tier with deepest impact and legacy giving

☐ I would like my membership to support the Grace House Akron endowment fund.

PAYMENT OPTIONS

(please select one)

- ☐ **Check enclosed** (Please make payable to Grace House Akron)
- ☐ **Charge my credit card:** ☐ Visa ☐ Mastercard ☐ American Express
- Automatically charge my account: ☐ **One time** ☐ **Monthly**

Credit card #

Exp Date ____ / ____ CVV# ____

Name (as it appears on card):

Signature

Date

required for credit card pledges

- ☐ **Stock** (Contact me about a direct transfer of stock for my membership payment.)
- ☐ **Employer Gift** (My employer will make my payment.)

MEMBERSHIP DIRECTORY OPT-IN

The Circle of Love creates an annual membership directory. It's available only to members of The Circle and will not be used for marketing or other promotions whose purpose extends beyond this group.

- ☐ **Yes**, please include my information in the directory.
- ☐ **No**, please do not include my information in the directory.

PUBLICATION RECOGNITION

- ☐ Please list my name for donor recognition purposes.
- ☐ I wish to remain anonymous.

FOR MORE INFORMATION

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PLEASE RETURN MEMBERSHIP FORM:

Grace House Akron, Inc. • 475 N. Howard St. • Akron, OH 44310

NO ONE DIES ALONE.