



Please complete this contribution form and mail with your check payable to:

Seven Acres Jewish Senior Care Services
6200 North Braeswood Blvd.
Houston, TX 77074

I would like my gift to be designated:

- In Memory of
- In Honor of
- Happy Birthday
- Happy Anniversary
- Speedy Recovery

Beneficiary's Name: _____

Amount:

- \$1,000
- \$500
- \$250
- \$100
- \$50
- Other \$ _____

PLEASE NOTIFY THE FOLLOWING OF MY TRIBUTE GIFT:

Name _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone _____

TRIBUTE DONATED BY:

Name _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone _____