

With this gift I'm helping a priest, sister, brother, seminarian, or deacon to have the best opportunity for quality recovery from an addiction or other behavioral health condition and overall health and wellness.

Name:					
Address:		City:		State:	Zip:
Phone:		Birth Month:			
Enclosed is my gift of: \$					
Cash enclosed Check enclosed Pay by credit card: VISA	Mastercard	Discover	AMEX		
Name on card:					
Card #:		Exp. Date:	/ Sec. co	de:	
Signature:					
This gift is In honor of: In memory of: _					
For my in honor/in m	nemory of gift, plea	ase send an ack	nowledgement c	ard to:	
Name:					
					: Zip:

Please contact Daniela Moritz at (248) 393-8969 or dmoritz@guesthouse.org with any questions regarding your gift.

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