

# Mae Volen Senior Center Contact Form

**This form is designed as a data entry form. Use the Tab key to move from one field to the next.  
After completion, print the form and either fax or mail it to the Mae Volen Senior Center.**

Name	
Title	
Company Name:	
Street Address 1	
Street Address 2	
City	
State	
Zip	
Daytime Telephone	
Email:	

- I am a member of the Mae Volen Senior Center.  
 I am a caregiver.  
 A loved one attends the Center (please provide the senior's name if you wish):

I would like information on (with check boxes)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Active Senior Program    | <input type="checkbox"/> Garden Bridge Program             | <input type="checkbox"/> Tour of Delray Facility                 |
| <input type="checkbox"/> Adult Day Care           | <input type="checkbox"/> In-Home Services                  | <input type="checkbox"/> Transportation                          |
| <input type="checkbox"/> Calendar of Events       | <input type="checkbox"/> Meals Program                     | <input type="checkbox"/> Volunteering                            |
| <input type="checkbox"/> Caregiver Support        | <input type="checkbox"/> Meeting Space                     | <input type="checkbox"/> Other (use space under "email message") |
| <input type="checkbox"/> Corporate donations      | <input type="checkbox"/> Private Geriatric Care Management |  |
| <input type="checkbox"/> Donating                 | <input type="checkbox"/> Tour of Boca Facility             |  |
| <input type="checkbox"/> Employment Opportunities |  |  |

Is there anything special you would like to tell us? Key in your message below:

**I wish to make a donation.**

Amount I wish to contribute: \$ \_\_\_\_\_

Check enclosed    Check # \_\_\_\_\_

Please make out the check to Mae Volen Senior Center, print out a copy of this form and fill it in and mail the check and the form to Mae Volen Senior Center, 1515 Palmetto Park Road, Boca Raton, Florida 33486.

Charge to my credit card.

Check Card Type    \_\_\_ Visa    \_\_\_ MasterCard

Cardholder name as it appears on the card:	
Card Number	
Expiration Date	

Signature if sending by mail: \_\_\_\_\_

\_\_\_ Please use this donation as you see fit.

\_\_\_ Please use this donation for \_\_\_\_\_

If you wish to purchase a brick for the Independence Walkway or a butterfly or leaf for one of our Trees of Life, please call 561-395-8920 or 866-711-6872 (toll free) and dial extension 216.

**Fax completed form to:**

Boca Raton facility, 561-338-9127  
Delray Beach facility, 561-274-9903

**Or**

**Mail completed form to:**

**Mae Volen Senior Center**  
1515 West Palmetto Park Road  
Boca Raton, Florida 33486.