



A Membership Subscription Will Not Only Save You Money... IT CAN HELP SAVE YOUR LIFE



Ambulance Service is Expensive! That is why we need YOU!

Community Rescue Service, Inc.



www.crs75.org

We would like to Thank You for your overwhelming support of Community Rescue Service (CRS) last year with our membership subscription drive. CRS would not be able to provide our life-saving service 24 hours a day to our community if it were not for your support.

When you call 9-1-1, CRS is dispatched to your address and we are there within minutes to provide quality and timely critical care. Over 10,300 times last year we provided emergency care in our territory that covers 42,000 citizens in a 75 square mile area. CRS employs over 55 highly trained and skilled medical technicians on a full or part-time basis to staff six ambulances CRS needs to serve our community. It is expensive. This year it will cost \$2.6 million for us to operate. Many people do not realize that CRS is a non-profit organization and not a part of the City, County or State government. Our ability to provide emergency care to our community is dependent largely on the contributions of the citizens we serve.

We depend upon the subscriptions and donations we receive from you. You, in turn, can depend upon CRS to respond promptly to your call for help with trained professional staff. Simply put, to maintain our quality emergency medical services, CRS needs your continued financial support.

As a member of our subscription drive, your contribution of \$50 (\$40 for seniors, 65+) protects you and members of your household for one year from any out-of-pocket expenses should you require our services.

Please, complete the enclosed response card and return it with your check in the envelope provided.

PLEASE HELP US SO WE CAN HELP YOU

Thank You!

YOUR LOCAL AMBULANCE & RESCUE SERVICE

We need your support to help us maintain the ambulance service in our community! Select Std. (i.e. individual or family) or Sr. Membership rate. If you find it in your means to add an extra Donation over the Subscription amount, it would be *greatly* appreciated!

Membership Category, under 65:	Membership Category, age 65+:	MY DONATION	TOTAL \$ ENCLOSED
<input type="checkbox"/> Standard Membership: \$50	or <input type="checkbox"/> Senior Membership: \$40	+ \$ _____	= \$ _____

SUBSCRIPTION RECEIPT

Make check payable to:

Community Rescue Service, Inc.

110 Eastern Blvd. North
Hagerstown, MD 21740

SUBSCRIPTION DRIVE RECEIPT
Membership Effective: July 1, 2008
thru June 30, 2009

Please correct Name and Address information before mailing the main card with your check.

AMT: \$ _____

CHECK #: _____ DATE: _____

Please note Disclaimer on back of stub

DETACH HERE & KEEP THIS STUB PORTION FOR YOUR RECORDS

Thank You!

PLEASE COMPLETE, SIGN BACK OF CARD & RETURN

“Subscription” amounts paid to Community Rescue Service, Inc. are not deductible as charitable contributions for Federal Income Tax purposes. HOWEVER, any amounts given over the “subscription” amount would be considered a tax deductible contribution.

**FOR INFORMATION:
301-733-1112 Ext-3113**

Thank You For Your Support!
Your generosity is appreciated!

I authorize Community Rescue Service, Inc. to release to Medicare, its intermediaries or my health insurance carrier any information needed for ambulance claims. I permit a copy of this authorization to be used in place of the original, and request payment of medical insurance benefits to be made to Community Rescue Service, Inc.

Signature: _____ Date: _____

PLEASE LIST ALL FAMILY MEMBERS WHO RESIDE IN YOUR HOME

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

If you wish, you can make your donation with VISA or MasterCard. Just complete this information below and return in the self addressed return envelope enclosed. You will not receive a receipt for your credit card charge.

VISA MasterCard

Credit Card No: _____ Expiration Date: _____

Name on Card: _____

Amount of Donation: \$ _____

Your Signature: _____ Current Date: _____