

CONTACT Lancaster Information Request Form...

Please fill out this form and return to:

CONTACT Lancaster Helpline
Business office
601 S. Queen St.
P.O. Box 2454
Lancaster, PA 17608-2454
lgascho@caplanc.org

Please send information about the following:

- Helpline**
- Deaf Contact**
- Reassurance Contact**
- Teen Line**
- Kids Line**
- Answering Service**
- Information and Referral Service**
- Volunteering as a CONTACT Lancaster Helpline listener.**
- Request a CONTACT Lancaster Speaker for my organization.**

...or I would like to:

- Request a CONTACT Lancaster Helpline speaker for my organization.**
- Make a tax deductible charitable donation for \$ _____**
- Other (please note) _____**

Name _____

Title / Organization _____

Address _____

City _____ State _____ ZIP _____

Phone _____

Best time to call _____