



**Community Caring Center's**  
**Caring Heart's Ambassadors**

- New Member  
 Returning Member



Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Phone Number \_\_\_\_\_

**Membership Contribution:**

- I wish to become a member of the Caring Heart's Ambassadors \$ 1,000  
 I understand that this is a 3-year commitment which can be canceled at  
 anytime by providing CCC with a written signed "OPT-OUT" notification.

**Payment Options:**

- Check: Enclosed is my check for 2018 in the amount of \$1,000 plus any additional contributions  
 indicated below made payable to the Community Caring Center of Greater Boynton Beach, Inc.
- Credit Card ( ) VS ( ) MC ( ) Amex Card - Card # \_\_\_\_\_  
 Exp. Date \_\_\_\_\_ CCV \_\_\_\_\_

Name on Card: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

- Year Two - I authorize CCC to bill my credit card for the second year on Jan. 15, 2019
- Year Three - I authorize CCC to bill my credit card for the third year on Jan. 15, 2020
- I wish to make a donation to further support the Caring Hearts Program \$ \_\_\_\_\_

Total Donation Amount \$ \_\_\_\_\_

- Check here to request information on Planned Giving.

THANK YOU FOR SUPPORTING OUR CARING HEARTS AMBASSADOR PROGRAM.  
 THIS PROGRAM PROVIDES FUNDING FOR OUR SENIOR CARE GIVING PROGRAM.

***MAKING A DIFFERENCE - DELIVERING A DIFFERENCE!***

PLEASE RETURN TO:  
 Community Caring Center of Greater Boynton Beach, Inc.  
 Mailing Address: P.O. Box 100  
 Boynton Beach, FL. 33435  
 561-364-9501  
 www.cccgbb.org