

Donation Form

THE CAMPUS OF THE JEWISH HOME OF GREATER HARRISBURG

Please complete the form below

Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ Email _____

Designation of gift: (please check one)

- | | |
|--|--|
| <input type="checkbox"/> Campus Designated Funds | <input type="checkbox"/> Stanley Sykes House Fund |
| <input type="checkbox"/> Benevolent Care | <input type="checkbox"/> Sam Morrison Speaker Fund |
| <input type="checkbox"/> Eph Cohen Nurse Education Fund | <input type="checkbox"/> The Hiken Fund |
| <input type="checkbox"/> Helen Hartman Nursing Aide Education Fund | <input type="checkbox"/> Scholarship Fund |
| <input type="checkbox"/> Esther Jacobs Atlas Employee of the Year Fund | <input type="checkbox"/> Women's Giving Circle |
| <input type="checkbox"/> Reva Swidler Resident Personal Needs Fund | <input type="checkbox"/> Unrestricted |

Memorials & Tributes

In honor or memory of _____

The Preservation Society

Please contact me regarding how I can make a planned gift.

Amount of Gift _____

Checks can be made payable to JHGH. Please mail your check along with this completed form to 4000 Linglestown Road, Harrisburg, PA 17112.



OF THE JEWISH HOME OF
GREATER HARRISBURG, INC.

THE JEWISH HOME
SKILLED NURSING AND REHABILITATION

THE RESIDENCE
A SENIOR LIVING COMMUNITY

4000 Linglestown Road
Harrisburg, PA 17112
717.657.0700
jewishhomeharrisburg.org

