



Donation Form

Gift Information:		
Date:	Amount: \$	<input type="checkbox"/> Check Enclosed <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card
Cerenity Community: <input type="checkbox"/> Humboldt <input type="checkbox"/> Marian of Saint Paul <input type="checkbox"/> White Bear Lake		
Donor Information:		
Name:		Primary phone:
Address:		
City:	State:	Zip:
Email:		
checks and/or money orders should be made payable to each site		
Credit card information (we accept Visa, Master Card and American Express):		
Name on Card:	Card Number:	
Card Type (i.e. visa/master card):	Expiration Date:	
Signature:		
Information regarding your gift (designate residence, care center, program or fund):		
Gift given in: <input type="checkbox"/> honor of <input type="checkbox"/> memory of	Name:	
<input type="checkbox"/> notify of my gift, but not the amount (indicate name and address below)		
Name:		
Address:		
City:	State:	Zip:
Mail completed form (and check if you choose to include that) to:		
Julie Thelen Cerenity Senior Care Humboldt 512 Humboldt Ave. St. Paul, MN 55107	Sarah Deering Cerenity Senior Care Marian of Saint Paul 200 Earl St. St. Paul, MN 55106	Julie Thelen Cerenity Senior Care White Bear Lake 1891 Florence St. White Bear Lake, MN 55110