



**Please fill out this form and
return with your donation.**

Name: _____

Address: _____

Phone: _____

Business Ph: _____

Cell phone: _____

Email: _____

Organization: _____

Position: _____

**I/My organization would like to
"Adopt a Family." We would like to
sponsor _____ family/families.**

**My check, made payable to the
"National EMS Memorial Service"
for \$ _____ is enclosed with this
form.**

Please send this form and your check to:

**National EMS Memorial Service
Attn: Kevin Dillard, Chairman
c/o 1170 International Parkway
Fredericksburg, VA 22406-1126**

Adopt-A- Family Program