



**Support the
Arc of San Antonio
in our mission to enhance
the lives of people living with
intellectual and developmental
disabilities.**

May 10, 2012
Community Breakfast
Interest & Support Card

Name: _____

Business: _____

Email: _____

Address: _____

Phone: _____

My Interests in The Arc of San Antonio's Proposed Service Enhancements Are:

(check all that apply)

- I am a parent, provider or caregiver representing a potential participant for the:
 - Intensive Level Day Habilitation Program
 - Community Courses
 - Both

- I represent a business that may be able to provide a venue or resources for courses involving:

- I and/or my organization would like to provide financial support for these services.
 - I will make a contribution in the amount of \$ _____
 - Please contact me for information regarding our process for a grant or contribution.

- I am a special needs educator who would like to help by: _____

- I represent a non-profit organization interested in partnering with The Arc of San Antonio by:

Other comments: