



LANCASTER  
EMS

Check type of subscription, complete the reverse side & return this portion with payment

- New       Single Membership .....\$60.00
- Renewal  Family Membership .....\$80.00
- Single Senior (60 & over) .....\$35.00
- Senior Couple .....\$55.00
- Please Consider Additional Donation .....  \$100  \$50  \$25  \$\_\_\_\_\_
- Total Enclosed** .....\$\_\_\_\_\_

Please make checks payable to:

**LANCASTER EMS**

100 East Charlotte Street  
Millersville, PA 17551

For information, contact us at:

**Emergencies Dial 9-1-1**

All other calls: 717-872-4688 ext. 7

Please keep this portion for your records.



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**2019 SUBSCRIPTION REQUEST**

Reference No. \_\_\_\_\_

Amount: \_\_\_\_\_

Check No.: \_\_\_\_\_

*Thank you for your contribution!*

Please Make  
Any Necessary  
Corrections To  
Name And/Or  
Address.

*Please list yourself and other family members residing in your home*

First Name	Last Name	MI	Jr/Sr/III	D.O.B.



Please charge my membership/donation of \$ \_\_\_\_\_ to my  VISA  MASTERCARD  DISCOVER

Card Number \_\_\_\_\_ Security Code \_\_\_\_\_ Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_ Daytime phone \_\_\_\_\_

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email Address \_\_\_\_\_