



The Pilot House

Special Needs Community Resource Center

The Pilot House General Donation Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

I would like to support

The Pilot House for the amount of \$ _____.

Enclosed is my check for \$ _____ payable to The Pilot House.

The Pilot House • Box 1553 • Fairfield, CT 06825

Please contact Doreen Caruso at info@thepilothouse.org
or (203) 610-3877 with any questions.

www.thepilothouse.org