



ODYSSEY HOUSE

A NON-PROFIT

SUPPORT FORM

NAME _____

EMAIL _____ CELL PHONE _____

ADDRESS _____

CITY, STATE, ZIP _____

GIFT OPTIONS

One-Time Gift

Today I will join the Odyssey Family who saves lives and improves our community every day.

I will donate at the following level:

Voyager: \$10,000 \$7,000 \$5,000 OTHER \$ _____

Navigator: \$3,000 \$2,000 \$1,000 OTHER \$ _____

Compass: \$750 \$500 \$250 OTHER \$ _____

Peer: \$200 \$100 \$50 OTHER \$ _____

Recurring Gift

Monthly Quarterly Amount \$ _____

PAYMENT INFORMATION

Cash or check enclosed (make checks payable to Odyssey House, 344 E 100 S, SLC, UT 84111)

Credit Card

CARD # _____

SECURITY CODE _____ EXP _____ TOTAL _____

SIGNATURE _____ DATE _____

Please contact me about a tour.

Please send me emails from Odyssey House.