



CHAL-BRIT REGIONAL

Emergency Medical Services

A Division of Chalfont EMS

P.O. Box 506 • Chalfont, PA 18914

Information Calls: 215-822-1308 ext. 418

www.ChalfontEMS.org

Dear Business Neighbor,

Chal-Brit Regional EMS is reaching out to our business community for our 2020-2021 Donation Drive. For the past 12 years, the Chal-Brit Regional EMS has provided emergency service with fully equipped Advance Life Support Ambulances, 24 hours a day, 365 per year. In 2019 our staff responded to more than 1,500 calls for emergency service, and we anticipate that number of calls for service will continue to increase in the years ahead due to the increase in new construction and traffic flow through our community.

By your company making a corporate donation, any of your employees requiring our emergency medical services at your facility would only be responsible for the amount covered by their medical insurance, regardless if they live in or outside of the local area covered by Chal-Brit Regional EMS.

In these trying economic times, we appreciate that for some, money is tight. We know this because it is for us too. The Chal-Brit Regional EMS is a unique non-profit 501 (c) (3) corporation that responds to ALL 911 requests for emergency medical service, regardless of the patient's ability to pay. While we differ from other businesses in that we provide service regardless of the ability to collect for that service. We are like all other conventional businesses in that our overhead expenses increase on an annual basis, as do the costs for new ambulances and equipment.

We thank you in advance for your generous support.

Sincerely,

The Officers and Staff of Chal-Brit Regional EMS

For questions call (215) 822-1308 x418



CHAL-BRIT REGIONAL *Emergency Medical Services*

DONATION FORM

2020-2021 Donation Rates:

- 1-10 Employees\$100.00
- 11-20 Employees\$200.00
- Over 20 Employees\$300.00
- Additional Donation\$ _____
- Total Enclosed \$ _____

For payments via PayPal, please include your reference number and membership type

Reference No. _____

Visit our secure website to use:



www.ChalfontEMS.org



Please make necessary corrections to name and address.

Please make checks payable to:
Chal-Brit Regional EMS

and mail to:

C/O American Heritage Federal Credit Union
765 East Butler Pike

New Britain, PA 18901

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Reference No. _____

CHAL-BRIT REGIONAL

Emergency Medical Services

2020-2021

Reference No. _____

Name: _____

\$ _____

AMOUNT

Thank you for your tax free contribution!

EMERGENCIES: DIAL 9-1-1

PLEASE COMPLETE AND RETURN THIS PORTION.

KEEP THIS PORTION