

“It is with your generosity that Sharsheret is able to support, inspire, educate, navigate, and embrace one woman at a time. I want you to know that you are the true Sharsheret, the chain that we’ve created.”

– Rochelle L. Shoretz, A”H Sharsheret Founder

THIS YEAR, I WOULD LIKE TO HELP SHARSHERET:

Support

8,000 women facing breast and ovarian cancer

Educate

30,000 students on college campuses

Train

650 healthcare professionals

Inform

75,000 families about cancer genetics

☐ \$5,000* ☐ \$1,000 ☐ \$500 ☐ \$360 ☐ \$180 ☐ \$100 ☐ Other: \$_____

- ☐ My employer has a matching gifts program. I have enclosed the appropriate form.
- ☐ I am interested in learning more about Sharsheret’s Legacy Giving Program.

*With a donation of \$5,000 & above, we welcome you to Sharsheret’s Jewel Circle.
Learn more at Sharsheret.org/jewelcircle

PAYMENT INFORMATION →

Name

Address

City State Zip

Email Cell Phone

Enclosed is my contribution in the amount of \$ made payable to Sharsheret.

Please charge my ☐ Visa ☐ Mastercard ☐ Amex

Card Number Exp. Date CVV Code

Name on Card Signature

☐ My gift is in honor/memory of

For gifts of \$36 and above, we will gladly send an acknowledgment card to:

Name Email

Address

Sharsheret is a 501(c)3 not-for-profit organization. Florida registration number ch31453: a copy of the official registration and financial information may be obtained from the division of consumer services by calling toll-free 800.435.7352 within the state. Registration does not imply endorsement, approval, or recommendation by the state.

OVER →

Thank You!

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www.sharsheret.org/donate



SHARSHERET[®]
Your Jewish Community Facing Breast Cancer