

**HOW YOU CAN HELP THROUGH THE DONATION OF  
HOUSING/TIME/EXPERTISE**

PRINT AND MAIL FORM TO:

NNJ Sanctuary Coalition  
Elizabeth D. Ames, MD (President)  
115 Summit St.  
Norwood, NJ 07648

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Check the ways in which you are able to help an asylee.

\_\_\_\_\_ My family/a friend/I have/has room(s) to house a person. (The Committee provides a monthly amount of support.)

\_\_\_\_\_ I will provide medical, dental, optical, other service. (Circle your choice.)

\_\_\_\_\_ I will provide transportation: weekly, twice a month, three times a month; once a month; once every six weeks. (Circle your choice.) Income tax deductible is based on mileage.

\_\_\_\_\_ I will provide food: bringing in groceries, bringing in a meal; taking asylee out for a meal; inviting asylee to my home for a meal. Weekly, every two weeks; three times a month, once a month, every six weeks; for holiday celebrations. (circle your choice.)

\_\_\_\_\_ I will provide entertainment; recreation; etc. (Movies, shopping, museum, sports events; etc. Weekly, every two weeks, three times a month, once a month, every six weeks, each season (circle your choice.)

\_\_\_\_\_ I will provide ESL instruction; computer instruction, tutoring in English, math, science, law, \_\_\_\_\_ fill in with your expertise.

\_\_\_\_\_ I will help the asylee meet other people related to his/her religion, profession, area of expertise; nationality.

\_\_\_\_\_ I will take an asylee shopping and buy him/her some clothing.

Here's what else I can offer: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone number: \_\_\_\_\_

E-mail address: \_\_\_\_\_