



NAZARETH AMBULANCE CORPS

NONPROFIT
ORGANIZATION
U.S. POSTAGE
PAID
PERMIT NO. 7477
PHILADELPHIA, PA



519 SEIP AVENUE • NAZARETH, PA 18064 • WWW.NAZARETHEMS.COM

2023-2024 SUBSCRIPTION DRIVE

“Help us to Help you” - Partnership for a healthier community - Please subscribe today!

Nazareth Regional Ambulance Corps., (Formally Nazareth Ambulance) is in service proudly serving your community. We are committed to providing quality emergency and non-emergency medical services to you.

As you know, the cost of medical equipment and ambulances is on the rise and therefore, we need your help to continue providing excellent emergency medical services to you and your employees. Your support is essential and greatly appreciated.

Your generous donation will go a long way to assist our team in providing valuable lifesaving equipment, Heart Monitors (Lifepak 15), Lucas Chest Compression Devices (Automatic CPR unit), Stair Chairs, Power Stretchers, and Automated External Defibrillators (AED's) are essential equipment needed to provide emergency medical care to members of our community who suffer a medical emergency or trauma.

Given that we are a non-profit organization, your donation is tax-deductible and serves as an excellent way to give back to your community. We graciously thank you in advance for your support for our team and your community.

RENTAL FACILITY AVAILABLE

For small gatherings, baby showers, post funeral luncheons, etc. Facility will hold up to 80 people. Bring your own food or caterer. For more information, please call 610-759-5422 or visit www.nazarethems.com



Retain This Stub For Your Records.

2023-2024 Subscription Drive

Subscription Valid from June 1, 2023 to May 31, 2024

I am a subscriber of
Nazareth Regional Ambulance Corps.
Please Call
610-759-5422

to arrange a non-emergency transport.

Thank You For Your Support!

Reference No. _____

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Detach and return this portion with your donation.

NAZARETH AMBULANCE CORPS



www.nazarethems.com
For Information Call
610-759-5422

2023-2024 SUBSCRIPTION DRIVE

Please circle amount of contribution in boxes below:

Businesses (1-15 Emp.)	Businesses (15+ Emp.)	Add'l Donation	Total
\$150.00	\$300.00	\$ _____	\$ _____

Please make checks payable to the Nazareth Regional Ambulance Corps or NRAC



Reference No. _____

<<CUS NAME>>
<<CUS ADDRESS>>
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