



REQUEST FOR INFORMATION

Title: _____ **First Name:** _____ **Last Name:** _____

Suite/Apt: _____ **Street:** _____

City: _____ **Province:** _____ **Postal Code:** _____

Home Phone: _____ **Cell Phone:** _____

Email: _____

Interests:

- I would like more information regarding the Windsor Residence for Young Men
- I would like information about volunteering in program or support areas
- I would like information on donations or specific needs
- I would like to subscribe to the monthly WRYM Netletter
- Other _____

Comments:

“We help young men to overcome homelessness and build new lives.”

1505 Langlois Ave. | Windsor, ON | N8X 4M3

p. (226)221-8464 | f. (226)221-8624 | info@wrym.ca | www.wrym.ca