Dear Friends,

Meet Miles Forma, and the first word that comes to mind is formidable. Though a birth injury left him unable to walk or speak in the typical way, Miles refuses to let disability dampen his powerful independent spirit. He gets around with the aid of a customized wheelchair and communicates with an assistive device that translates his words into a clear, resonant voice. At 34, this charismatic young man lives in a CPWestchester group home with his roommates, Nick, Matthew, and Margo. “All of them are very independent like me,” he says.

Miles started at CPW 12 years ago, and the agency changed his life. “They provide me with a great space and support to do my work at the DayHab program. CPW does a good job managing and providing staff at Hanson House, where I live.”

At CPW, our mission is to meet the complex needs of disabled people of all ages. Our rewards are the miracles we witness every day. A little boy takes his first steps on a walker. A little girl with autism speaks her first words. A proud young adult takes the bus to work.

Since our founding in 1949, our Center has enabled thousands of people faced with extraordinary challenges to reach their potential and realize their dreams. We could not do this without the kindness and generosity of friends like you.

This year COVID 19 has posed many additional obstacles to our mission of caring for children with special needs as well as residents in our group homes and other living facilities throughout Westchester. Your support will help us to maintain our critical services and ensure the health and safety of our residents, participants, and staff.

In this season of thanksgiving and reflection, we are so grateful for your generosity.

Warm regards,

Richard N. Osterer, Board President

Linda Kuck, Executive Director

MY PLEDGE

Enclosed is my gift of ☐ $1,000 ☐ $500 ☐ $250 ☐ $100 ☐ Other $ _________.

Please make your check payable to Cerebral Palsy of Westchester
You may also make your contribution online at www.cpwestchester.org/donate

Name ___________________________________________________________

Address _______________________________________________________________________________________________

City/State/Zip ___________________________________________________________________________________________

Phone ___________________________ E-mail ___________________________

Please return with your check to: Cerebral Palsy of Westchester/Development Office 1186 King Street, Rye Brook, NY 10573

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