

Donation Form

Please make checks payable to:
MidMichigan Health Foundation
4000 Wellness Drive, Midland, MI 48670
(989) 839-3342

Yes, I am proud to support:

- | | |
|--|---|
| <input type="radio"/> MidMichigan Medical Center – Alpena | <input type="radio"/> MidMichigan Home Care * |
| <input type="radio"/> MidMichigan Medical Center – Clare | <input type="radio"/> MidMichigan Medical Center – Midland |
| <input type="radio"/> MidMichigan Medical Center – Gladwin | <input type="radio"/> MidMichigan Medical Center – Mt. Pleasant |
| <input type="radio"/> MidMichigan Medical Center – Gratiot | <input type="radio"/> MidMichigan Medical Center – West Branch |

I wish to donate a gift in the amount of:

- | | |
|-----------------------------|--------------------------------------|
| <input type="radio"/> \$50 | <input type="radio"/> \$500 |
| <input type="radio"/> \$100 | <input type="radio"/> \$1,000 |
| <input type="radio"/> \$250 | <input type="radio"/> Other \$ _____ |

I would like to designate my gift to be used towards:

- | | |
|---|--------------------------------------|
| <input type="radio"/> Area of Greatest Need | <input type="radio"/> Endowment Fund |
| <input type="radio"/> Heart and Vascular Center | <input type="radio"/> Hospice Care* |
| <input type="radio"/> Love Light Tree Campaign | <input type="radio"/> Other _____ |

Name: _____ (as you would like to be acknowledged)

- I prefer my donation remain anonymous

Address: _____
City _____ State _____ Zip _____ Phone _____
Email _____

Would you like to make your gift a Memorial or Honorary Tribute, or use it to commemorate a special occasion? If yes, please complete the following:

In memory of _____ In honor of _____
Commemorating _____ (birthday, anniversary or other occasion)

Please indicate below who you would like us to notify of your tribute:

Name: _____
Address: _____ City _____ State _____ Zip _____

<input type="radio"/> MasterCard	<input type="radio"/> Visa	<input type="radio"/> Discover
Card # _____	Exp. Date _____	
Signature _____	Security Code _____	



MidMichigan Health
UNIVERSITY OF MICHIGAN HEALTH SYSTEM