Special Occasion

Happy Birthday to: _____

Happy Anniversary to: _____

In Memory of: _____

With Best Wishes to: _____

With thanks to: _____

Happy Holidays to: _____

Other Special Occasion: _____

____ I would like to remain an anonymous donor.

Celebrate someone special with a donation to the Hanover and District Hospital Foundation and create an enduring tribute that helps health care in your community.

HANOVER AND DISTRICT
HOSPITAL FOUNDATION

90 7th Avenue
Hanover, Ontario
N4N 1N1

Phone: 519.364.2341 Ext. 203
Fax: 519.364.6602
E-mail: spaterson@hanoverhospital.on.ca
www.hanoverhospital.on.ca/foundation.php

The gift amount will remain confidential.

A charitable tax receipt will be issued.

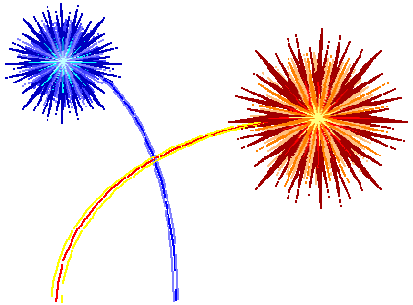
The SPECIAL OCCASION Gift

HANOVER AND DISTRICT
HOSPITAL FOUNDATION

Moments of celebration should be marked by something special. One way of ensuring that your occasion will be commemorated is through a gift to your local *Hanover and District Hospital Foundation.*

Meaningful Giving

Gifts to your local hospital help to maintain the excellent health care offered in your community. Your support can be given to area of greatest need or to a specific project within the hospital.



All gifts are recognized with a card that can be sent directly to the person in whose name you are donating or can be sent to you, the donor, for you to present.

The *Hanover and District Hospital Foundation* welcomes donations that mark any occasion.

Tribute Donations

Gifts in honour of friends and loved ones can be made to the *Hanover and District Hospital Foundation* to acknowledge a special occasion such as a birthday, promotion, retirement or wedding.

Hosts of special events, such as anniversaries, may wish to ask their guests to contribute to their local hospital in lieu of personal gifts.

Those hosting a party or event may wish to make a gift in support of the hospital on behalf of their guests.

Holiday Giving

Celebrate the season of giving by paying tribute to a loved one with a gift to the *Hanover and Hospital Foundation.*

In Memoriam

A gift in lieu of memorial flowers expresses your regard for a loved one and their family while also aiding local health care. Special donation cards are available at local funeral homes or gifts can be made online.

I would like to recognize a special occasion with a donation to the Hanover and District Hospital in honour of

Name:_____

Enclosed is my gift of $_____ to the *Hanover and District Hospital Foundation .*

Donor Name:_____

Street:_____

City:_____

Province:_____Postal Code:_____

Please send acknowledgement to:

Name:_____

Street:_____

City:_____

Province:_____Postal Code:_____

Please direct my gift to:

__ Area of greatest need

__Designated fund:_____

__ My cheque is enclosed

__ I prefer to use my credit card

__Visa __ Mastercard __ AmEx

Card No. - - - -

Expiry Date_____

Signature:_____