



FAIRCHILD FOUNDATION

WAYS TO GIVE

Your donation stays locally in our community and will assist **Fairchild Medical Center** in providing and expanding access to quality health care in our community.

PROVIDER DONORS MAKING CONTRIBUTIONS WILL RECEIVE:

- A special pin for name badge
- Recognition on the Annual Giving Wall in Lobby & FMCF Newsletter
- Any contributions totaling \$100 or more annually makes you eligible for the "Pinnacles of Giving Society".
- A Lifetime cumulative total of \$5,000 or more or contributors of \$500 annually receive a yearly invite to Donor Dinner.
- Initial gift for signing up for payroll deduction, and yearly gift.

HOW TO GIVE

Payroll deductions:

- \$ _____ per pay period

I authorize the following payroll deduction to be donated to Fairchild Medical Center Foundation. I acknowledge that this is voluntary on my part and the authorization may be withdrawn by me at any time.

GIFT DESIGNATION:

- Where the need is greatest - General Fund \$ _____
- Future Building Fund - Restricted Foundation Fund \$ _____

PROVIDER SIGNATURE:

Check/Cash:

Credit Card:

Name on Card: _____

Credit Card # _____

Exp. Date: _____

CVC Code: _____

LEARN MORE ABOUT THE FOUNDATION

Circle if Interested

- VOLUNTEER OPPORTUNITIES
 - HEALTHY KIDS FAIR
 - GOLF TOURNAMENT
 - SHARE THE MAGIC
- NEWSLETTER
 - WRITE ARTICLES
 - SIGN UP TO RECIEVE

Contact Information

Name _____

Address _____

City. ST. Zip _____

Email _____

Phone _____

Date _____

- 530.841.6239 or X 6239
- canstead@fairchildmed.org
- 444 Bruce St., Yreka, CA 96097
- fairchildmed.org/foundation

Please return to Foundation Office or Administration