



EVERY
GIFT
COUNTS

Every gift to the
St. Joseph's Hospital Foundation
has enormous impact
on the quality of care
in our hospital.



TO MAKE A DONATION, PLEASE COMPLETE THIS CARD AND RETURN IT TO US AT:
St. Joseph's Hospital Foundation, 2137 Comox Avenue, Comox, BC V9M 1P2

CARING SPIRIT PROGRAM

This gift is being made in appreciation of a special health care professional(s):

Name

Department

Date(s) of hospital stay

If you wish to provide a personal message please include a note in this envelope.

FROM

Name

Please disclose my name to my caregiver. I prefer to remain anonymous.

Street

City

Province

Postal Code

Telephone Number

Email Address

PLEASE FIND ENCLOSED MY GIFT OF

\$25 \$50 \$100 OR I prefer to give \$

Enclosed is my cheque or money order payable to the
St. Joseph's Hospital Foundation

I prefer to use my credit card. Please charge my Visa MasterCard

Card #

Expiry /

Signature

*Thank you once again
for your contribution to our hospitals.*



*We are committed to protecting your privacy. In accordance with the BC Personal Information Protection Act,
St. Joseph's Hospital Foundation retains only information regarding your gift history.
SJHF does not sell, trade, or rent its donor information.*