

HOSPITAL DONATION FORM

- I'd like a Gold Page Certificate (minimum donation of \$500.00): Attached is cash/check# _____ in the amount of \$_____.
- I'd like a \$100 Million Club Certificate (minimum donation of \$100.00): Attached is cash/check# _____ in the amount of \$_____.

Note: Donations should be made out separately.

Please have the following name put on the certificate:

IN MEMORY OF

IN HONOR OF

FOR SERVICE IN _____

FROM _____

Send certificate to: Name _____

Address _____

City/State/Zip _____

Checks are to be made payable to Shriners Hospitals for Children.