

Say Thank You with your charitable gift

Your message will be shared with the Circle of Care recipient during a celebratory recognition with their department.

Along with your gift, please include a note to share with your honoree:

www.supportholyroary.com



CHECK HERE IF NEW ADDRESS


Holy Rosary
 FOUNDATION | SCL HEALTH
 2600 WILSON STREET
 MILES CITY, MT 59301

Holy Rosary Foundation

The promise of healthcare philanthropy is the ability to change lives and the power to save lives.

Holy Rosary Foundation

develops the resources that help keep and expand this promise to the people who trust Holy Rosary Healthcare to care for them.

For more information about the **Circle of Care** or questions about **making your gift**, please call **406-233-2664**.

Advancing the promise of life through philanthropy.

Holy Rosary Foundation

is a not-for-profit 501 (C)(3) organization.

For more information on ways you can make a difference for patients at Holy Rosary, or to share your story – please contact us at

406-233-2664
www.supportholyroary.com



2600 Wilson Street | Miles City, MT 59301



Honoring
 THOSE WHO
 TRULY MAKE A DIFFERENCE



Gifts of Gratitude

Make a Great Impact



Sometimes words are not enough to express the gratitude we feel for the care that we have received.

Physicians, nurses, volunteers, and staff members do their best each day to demonstrate the spirit of caring that defines the mission at Holy Rosary Healthcare.

Perhaps the most impactful way to recognize the extraordinary care you received at Holy Rosary Healthcare is through a gift of gratitude in honor of a Holy Rosary associate, volunteer or department.

Holy Rosary Circle of Care provides you the opportunity to say "thank you" to those who made a difference and were there when you needed them the most.

Make a gift...
make a difference

To make a gift in honor of someone special, please complete the form to the right and send it along with your donation using the attached self-addressed envelope or online at www.supportholyroary.com.

Honorees will be recognized at a special department presentation.

Tear this off and keep for your records.



Yes! I want to make a gift to honor:

Honoree's Name

Date of Service

Department/Area

Your Name

Address

City State Zip

Phone

E-Mail

Enclosed is my check for:

\$25 \$50 \$100 \$500 \$1000

Other: \$ _____

(Please make payable to Holy Rosary Healthcare Foundation)

Please charge my card:

VISA MASTERCARD _____

Name on Card

Card #

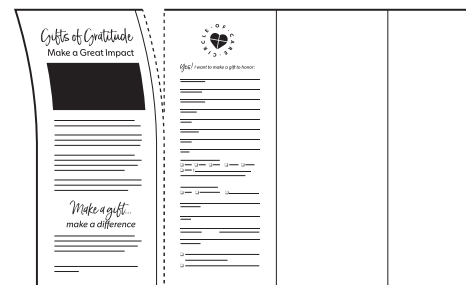
Expiration Date CVS Code (on back of card)

Signature

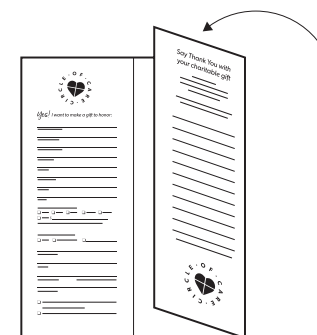
I would like to know more about including Holy Rosary Foundation in my estate plans.

I'm including Holy Rosary Foundation in my estate plans.

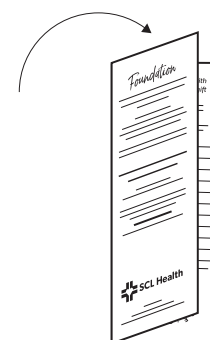
1 Tear off left panel



2 Moisten glue strips and fold in right panel



3 Insert check (if applicable), fold over left panel and seal closed



4 Place stamp on mailing panel and drop in mail