



Together we shine.

2024 Annual Campaign



My Information

* Full Name: _____

* Work Location: _____

* Address: _____

Mobile Phone: _____

* denotes a required field

Employee I.D. #: _____

* Department: _____

* City: _____ State: _____ Zip: _____

* Work Email: _____

☐ I would like my gift to remain anonymous.

I would like to donate...

☐ Cash or Check

Return your check (make checks out to Schuyler Foundation) or cash, with this completed form, to the foundation office.

Donation Amount: \$ _____

☐ Credit/Debit Card

To make a one-time gift, or set up a recurring credit/debit card donation (processed on the 10th of each month, or every other Friday), please visit our online form at Give.chihealth.com/SchuylerAnnual.

I would like my gift to support...

- ☐ **General Capital/Equipment:** Funds can be used to purchase, upgrade, or maintain equipment and other items to support hospital operations, enhance patient care, aid in research, and increase staff productivity.
- ☐ **CHI Health Clinics Patience Assistance:** Funds benefit patients treated at CHI Health clinics by providing assistance for prescription medications, transportation, and other health related needs for patients who qualify.
- ☐ **End of Life Comfort Care:** Funds will provide comfort carts that have supportive reading materials, music, and light refreshments for families so they do not have to leave their loved one's bedside.
- ☐ **Faith, Hope, & Love:** The purpose of Faith, Hope & Love is to provide emergency financial assistance to your fellow workers during times of need. Funded exclusively by employee contributions, this fund is administered by CHI Health to current employees who meet the criteria.
- ☐ **Infant Bereavement:** Funds will supply grief support resources to patients and their families who experience the loss of a baby during pregnancy, at birth or shortly after birth. Funds are used to purchase memory boxes, keepsake items, semi-annual memorial and committal services, and burial assistance on a limited basis.
- ☐ **Other** (write in your choice) _____



Scan this code
to make
your donation
online!

Thank you for your support! Please return forms to:

CHI Health Schuyler Foundation
104 W 7th St, Schuyler, NE 68661-1304
Questions? Contact Claudia Lanuza

(402) 352-4075 or Claudia.Lanuza@chihealth.com