Please share your story and tell us why you are grateful:

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Please check here if we may share your comments with your caregiver(s)._____

Your gift is deeply appreciated!

For more information on the many ways you can support Overlook Medical Center, visit us online at www.overlookfoundation.org

www.overlookfoundation.org
Your Gift of Gratitude

Maybe it’s the nurse who held your parent’s hand or the physician who saved your child’s life. Or perhaps it’s the physical therapist who helped you take your first steps or the technician who reassured you.

“We are very comforting to be treated by people who you know really care.”

Your gesture of appreciation and generosity will touch the lives of countless people as you support Overlook’s pursuit of clinical excellence, compassionate care and a healing culture.

“From beginning to end their professionalism was top notch, nothing ever slipped by them. They were always aware of and concerned with my comfort level, and by the end of my treatments I felt like I was surrounded by old friends...they really do watch out for you.”

Gift of Gratitude

When you make a gift in honor of one or more of your caregivers, they join a prestigious group of employees.

- Honorees are presented with an award certificate by a member of senior leadership and their manager, as well as a pin signifying their status as a Gift of Gratitude award recipient.
- Photographs are taken and news of the award is publicized within the Overlook community.
- Recognition and receipt of the award is forwarded to the Human Resources Department for inclusion in the caregiver’s file.

Most importantly your gift not only recognizes your caregiver’s contributions, it also provides an investment in the wonderful work they do by supporting continuing education for health care professionals; innovative support programs and therapies for patients; and lifesaving technology. You can even choose to designate a specific department or unit to benefit from your gift.

I would like to make a gift of $: __________________

In honor of my caregiver:
_________________________________________________
(filled name and department if known)

This gift is in memory of a family member/friend:
__________________________________________________

Name: ___________________________________________
Address:  _________________________________________
__________________________________________________
City:   ____________________________________________
State: __________________     Zip __________________
Phone: ___________________________________________
Email: ____________________________________________

Please make your check payable to: Overlook Foundation

Or charge my:
Visa_____  Mastercard_____  Amex____   Discover_____  
Card #:____________________________________________
Expiration Date: ___________________________________
Signature:_________________________________________

Your entire tax-deductible gift remains at Overlook.

We would love to hear about your experience! Please include a note with your gift or share your thoughts on the back of this form.

For more information about The Gift of Gratitude Program contact Lorie McDonald at: 908-522-2855 or lorie.mcdonald@atlantichealth.org