

## Donation Form

The McKain-Kinney Remembrance Rose Garden and its care are funded by donations received by the St. Luke's Magic Valley Health Foundation. Gifts to the Rose Garden provide unique ways to recognize someone special while fulfilling the Foundation's mission to improve health care in the Magic Valley. Although donations may be restricted to specific programs, the Foundation encourages non-restrictive gifts.

I would like to make a gift of \$\_\_\_\_\_ to the Rose Garden for the following:

- Paving Brick: \$150       Iron Bench:\* \$2,000  
*\*placed around walking path.*
- Individual Rose Bush: \$500  
Preferred rose color/type: \_\_\_\_\_
- Climbing Rose: \$1,500  
Preferred rose color: \_\_\_\_\_
- Area I:      \$3,000       Area VI: \$2,000
- Area II:      \$1,500       Area VII: \$1,500
- Area III:      \$1,500       Area VIII: \$1,500
- Area IV:      \$1,500       Area IX: \$1,500
- Area V:      \$1,500       Area X: \$1,500
- Butterfly: \$25,000       Alpine: \$25,000
- My gift is enclosed. (Please make checks payable to St. Luke's Magic Valley Health Foundation.)
- I wish to pledge my gift and make payments:  
 Monthly    Semi-annually    Quarterly    Annually
- I wish to have my gift remain anonymous.
- My gift is:       in memory of       in honor of

Please PRINT the wording exactly as you would like it to appear on the engraving:

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Please notify the following individual(s) about my memorial/honor gift: \_\_\_\_\_

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Their Name: \_\_\_\_\_

Their Mailing Address: \_\_\_\_\_

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This gift is made by: \_\_\_\_\_

Donor's Address: \_\_\_\_\_

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Donor's Phone Number: \_\_\_\_\_

Donor's Email Address: \_\_\_\_\_

Notice of your gift will be sent to the family without mention of your gift's monetary amount.

## Other Giving Options To Consider:

Your ***honor gift*** can be a meaningful way of acknowledging a special person or an occasion, such as a birthday or an anniversary.

Your ***gift of cash, securities, property or life insurance*** will enhance the health care services available to you and your family while providing a possible reduction in your income and estate taxes.

Your ***estate gift*** will help assure that quality health care continues to be available to the Magic Valley community.