



IT'S YOUR CHANCE TO SAY THANKS.

THEY ARE A LOT MORE THAN JUST HEALTH CARE PROFESSIONALS.

DOCTOR & FAMILY HEALTH TEAM

APPROCIATION WEEK
january 23 - 27

YES! I WANT TO DONATE TODAY...

I would like to recognize

_____ (name)

_____ (office address)

with a gift of \$30 \$50 \$100 \$500 \$_____ to the Greater Peterborough Health Services Foundation.

Charitable Registration Number 888118247 RR0001
Charitable receipts will be issued for all donations of \$10 or more or upon request.

THANK-YOU CARD DETAILS

A thank-you card will be sent to the recipient of your choice. It will read as follows:

“Dear ❖...recipient name...❖, As part of Doctor & Family Health Team Appreciation Week, ❖...donor name...❖ has given a gift of ❖...donation amount...❖ in your honour.”

DONOR INFORMATION

Salutation Mr. Mrs. Ms. Miss

First Name/Last Name _____

Address _____

City _____ Postal Code _____

Email/Phone _____

PAYMENT INFORMATION

Pay online at www.gphsf.ca/thanks

Pay by telephone by calling (705) 740-8074

I have enclosed a cheque made payable to “Health Services Foundation”

I prefer to pay by credit card:

Card Type VISA Mastercard AMEX

Card # _____ Expiry _____ / _____

Signature _____

ADD A PERSONALIZED NOTE:

Or call 705-740-8074 for other ways to personalize your card.

THANK YOU FOR YOUR SUPPORT.



Guiding, Giving, Better Living

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