

WHEN YOU OR SOMEONE YOU LOVE NEEDS PREMIER HEALTH CARE, YOU CHOOSE ASPIRUS!

Now there's a way you can thank those who made your excellent hospital, clinic and specialty care possible: **the Aspirus Hero program.**

The program supports health care in our community, while also showing your appreciation to your special Aspirus Hero through a charitable gift in any amount to the Keweenaw Health Foundation made in their honor.

When you make your gift, your Aspirus Hero is notified and receives a custom made Aspirus Hero lapel pin to wear as a symbol of your appreciation.

Every gift is gratefully received and recognized as a charitable gift.



I would like to say **thanks** to my **Aspirus Hero.**

(NAME OF HERO)

Aspirus Keweenaw Facility
or Department: _____

My story: _____

Donor Information

Please say thanks to my Aspirus Hero by directing my charitable gift of \$ _____ to advance the health and health services of programs, education, trauma, pediatrics, cardiac, cancer, women's health and other health services. I understand that my gift is tax-deductible to the extent allowed by law.

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Enclosed is my check, payable to the Keweenaw Health Foundation

Please charge my Visa MasterCard Discover

Card Number _____ Exp. Date _____ Signature _____ CSC Code* _____

Please remove my name from the Keweenaw Health Foundation mailing list



MAIL COMPLETED FORM TO: Keweenaw Health Foundation, 205 Osceola St. Laurium, MI 49913

For more information, please contact the Aspirus Health Foundation at (906) 337-6500.

**3 or 4 digit code found on the back of card used to protect from fraud*