



Commemorate Your Baby's Birth Here at EvergreenHealth
 Dedicate a Flower with Your Baby's Name and Birth Date.

Hydrangea (\$100)

Daisy (\$200)

Sunflower (\$300)

I would also like to make an additional donation in the amount of \$_____.

BABY'S NAME: _____

BABY'S BIRTH DATE: _____

This is a Gift. Please notify:

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

Donor Information:

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

Make Checks Payable To:

EvergreenHealth Foundation
 12040 NE 128th Street, MS #5
 Kirkland, WA 98034-3013

Payment Method:

Check enclosed in the amount of \$_____/ Check to follow.

Please charge the amount of \$_____ to

VISA MasterCard Discover American Express

Credit Card #: _____ Exp. Date: _____

Name as it appears on the card: _____

Signature: _____

Thank you for supporting the programs and services of EvergreenHealth Women's and Children's Care with a tax-deductible gift.
 Upon completion of your inscription, a photo will be emailed to you. For more information, contact Tracie Ziegler at (425) 899-1903.