

*Thank you ...  
for saying "Thanks!"*

**Your gift to The Garden,  
A Special Place for the Memory  
Impaired, supports the efforts  
of staff in creating a gracious,  
comfortable and supportive  
lifestyle for residents of The  
Garden. Today, your gift has never  
been more needed or appreciated.**

*Thank you for filling out this form  
and sending it with your check to:*

MID COAST HEALTH SERVICES  
Development Office  
P.O. Box 279  
Brunswick, Maine 04011

*For more information:*

(207) 373-6064

E-mail: [development@midcoasthealth.com](mailto:development@midcoasthealth.com)

[www.midcoasthealth.com/gifts](http://www.midcoasthealth.com/gifts)



*The Garden*

*A Special Place for the Memory Impaired*

- Yes, I wish to make a donation to the  
The Garden, A Special Place for the  
Memory Impaired!**

**Comments:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**From:**

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/ZIP \_\_\_\_\_

Telephone \_\_\_\_\_

E-mail \_\_\_\_\_

- Enclosed is my gift of \$ \_\_\_\_\_

*Please make check payable to Mid Coast Senior Health Center.*

- Charge my gift to my credit card:

VISA  MasterCard  Discover  AmEx

Acct # \_\_\_\_\_

Amount \$ \_\_\_\_\_ Exp Date \_\_\_\_\_

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Please credit my gift toward:

Unrestricted - *Use as needed*

Staff Education Fund

Special Program \_\_\_\_\_

- I/We wish our donation to be anonymous