I WOULD LIKE TO RECOGNIZE:

Name:
Department:
This caregiver deserves recognition because

We are honored that you have chosen to support St. John's Episcopal Hospital through the St. John's ICARE Foundation's Grateful Patient & Family Program. Your appreciation and comments will be shared with our Patient Experience Officer.

Please mail this form and your donation to St. John's ICARE Foundation, 377 Oak Street, Suite 209, Garden City, NY 11530. Attention: Nancy Leghart, Executive Director.

Thank you for your gift!

ABOUT ST. JOHN'S ICARE FOUNDATION

The St. John's ICARE Foundation was established in 2021 to benefit and support the charitable and educational activities of Episcopal Health Services, Inc., (EHS). With the support of committed leadership, team members, volunteers, and the community, the St. John's ICARE Foundation raises awareness and funds in support of the strategic priorities of EHS.

OUR MISSION

The St. John's ICARE Foundation fosters a culture of philanthropy to secure, manage and distribute gifts in support of the mission and vision of Episcopal Health Services Inc. and St. John's Episcopal Hospital.

OUR VALUES

- I Innovation
- **C** Compassion
- A Accountability
- **R** Respect
- **E** Empathy







377 Oak Street, Suite 209 Garden City, NY 11530 sjicarefoundation.com | 718.869.8062



Grate Full Patient & Family Program

Show Your Gratitude!

When you make a donation to our Grateful Patient & Family Program, you are helping St. John's ICARE Foundation support the hospital and invest in our community's health and well-being. Our Grateful Patient & Family Program is the perfect way to say thank you for the outstanding care you received, the excellent treatment one of your loved ones received, or to honor the memory of someone who received care at St. John's Episcopal Hospital.

Physicians, nurses, team members or volunteers who are honored by your donation will receive a recognition letter informing them of your gift and gratitude.

Your generosity will enhance the experience of future patients by helping purchase new technologies, modernizing our facility and introducing new programs while maintaining St. John's exceptional care close to home.



- John B.





"The quality of care that I have received over the last three years has been amazing. I am extremely grateful to the entire St. John's team."

Destiny S.

"My experience with the staff was great, and my nurses were awesome. In two words, the staff at St. John's are friendly and attentive." Yes!

I want to make a gift of gratitude.

Namo

Name
Address
City
State Zip
Email
Phone
I would like to make a gift of \$
☐ Cash ☐ Check Checks Payable to St. John's ICARE Foundation
□MC □VISA □AMEX □DISCOVER
Credit Card Number
Expiration Date Security Code
Signature (Required for credit card gifts)
Date Billing Zip Code
☐ In Memory of
☐ In Honor of

Scan the QR code to donate online!

