

Why join the Corporate Honor Roll?

You want Self Regional Healthcare to always be there for your employees and their families.

Chances are that someday you, someone you love, or one of your employees will need the services of Self Regional Healthcare. When that time comes, by investing in the best healthcare facilities and technologies where you and your employees live and work, you're demonstrating that your business is an outstanding corporate citizen.

You want to make a difference here at home.

By being an outstanding corporate citizen, your support is showing that you care deeply about the health and well-being of our community and region.

You want to join other business leaders.

We hope you'll join with other outstanding corporate citizens to become a member of the Self Regional Healthcare Foundation Corporate Honor Roll. Your support and involvement will help ensure that high quality healthcare services will continue to be available right here at home.

About us

Self Regional Healthcare Foundation funds health-related programs and projects at Self Regional Healthcare, a not-for-profit, regional referral hospital that provides care to residents of Greenwood, Abbeville, Laurens, Saluda, McCormick, Edgefield and Newberry counties. Services include prevention and wellness, acute care and tertiary care services including cancer care, neurosurgery, heart and vascular surgery, NICU, orthopedics and genetics. Self Medical Group is its employed physician affiliate network of 33 practices and more than 115 physicians.

Thank you for your support.



SELF REGIONAL
 HEALTHCARE FOUNDATION

1325 Spring Street • Greenwood, S.C. 29646
www.selfregionalfoundation.org

SELF REGIONAL
 HEALTHCARE FOUNDATION

An Invitation

You're invited to join the Self Regional Healthcare Foundation's Corporate Honor Roll, a network of community minded donors whose philanthropic support is critical to helping Self Regional Healthcare achieve its mission.

As the region's premier healthcare provider, Self Regional Healthcare is committed to providing the best in diagnostic and life-saving equipment, services, technologies and facilities. By becoming a member of the Corporate Honor Roll, you're helping to ensure that Self Regional continues to provide your employees and all patients with the very best care.

We believe that you will find that by investing in the health and well-being of your community, you're making a difference now...and into the future.

Membership

Membership in the Corporate Honor Roll is the beginning of a special partnership between you, other businesses and the hospital. Your participation signifies your commitment to our community and your desire to assure that all area residents have access to excellent healthcare, right here at home.

In recognition of your support through the Corporate Honor Roll program, you will receive:

- A recognition plaque for your office and a listing on the Self Regional Healthcare Foundation Donor Wall.
- Invitation to the annual donor recognition event, the Business Leader Roundtable (BLR) series and other special programs and events.
- Your company will be listed in the Self Regional Healthcare Foundation Donor Report.
- Inclusion in Corporate Honor Roll promotions in local media.
- Check presentation photos.

Join Us

Yes, my business would like to become a member of the Corporate Honor Roll with a pledge at the following level (payable over five years):

Pledge Level	Annual Giving
<input type="checkbox"/> \$ 100,000+ Platinum	\$20,000
<input type="checkbox"/> \$ 50,000 Gold	\$10,000
<input type="checkbox"/> \$ 25,000 Silver	\$5,000
<input type="checkbox"/> \$ 10,000 Bronze	\$2,000
<input type="checkbox"/> \$ 5,000 Member	\$1,000

Company Name _____

Please print name to appear in recognition listing.

Representative's Name: _____

Title: _____

CEO's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email _____

Payment Information (Please select one):

\$ _____ Check
(Payable to Self Regional Healthcare Foundation)

Please charge \$ _____ to my credit card

MasterCard Visa Discover

American Express

Name on Card: _____

Account #: _____

Exp. Date: _____ CV Code: _____

Signature: _____

Please return this form to Self Regional Healthcare Foundation, 1325 Spring Street, Greenwood, S.C., 29646

"Self Memorial Hospital...

A debt of gratitude to the community that has been good to me."

James C. Self

