

You're Invited ...

You are cordially invited to join your family and friends for McLaren Bay Medical Foundation's 2020 VIRTUAL Memorial Tree program.

You can be part of this event by making a special tribute in memory or honor of someone dear to you. The names of your loved ones will be read at the virtual ceremony and if you provide a photo, it will be included in the online slide show.

This form is also available at mclaren.org/baymedicalfoundation click on Foundation Events at the top of the page, then select Memorial Tree.



All participants will receive a printed booklet with the listing of names, as well as a keepsake ornament.

If you receive a duplicate, please pass it along to a neighbor or friend.

By giving you keep your memories alive.
Thank you.

Under enacted HIPAA rules you are being notified that if you desire to be removed from our mailing list you need to make a request in writing to the Foundation.



MEMORIAL TREE

*A memory is a special gift
that survives*



BAY MEDICAL FOUNDATION



BAY MEDICAL FOUNDATION

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mclaren.org/baymedicalfoundation



BAY MEDICAL FOUNDATION

McLaren Bay Medical Foundation Memorial Tree

The Memorial Tree Program has been a tradition of the Foundation for nearly 20 years. Like many things this year, we are unable to do the in-person program. However, we are continuing the tradition with a virtual ceremony to honor our loved ones.

The virtual program will be posted online:

**Sunday, December 6, 2020
2:00 pm**

(Donation must be received by November 27, 2020 to be included in the program.)

The program can be viewed on our Facebook page and we will send you a link so you and your family can view it anytime afterwards.

**REMEMBERING IS A
GOOD THING... IT KEEPS
OUR LOVE ALIVE.**

I want to make a gift of \$ _____
in support of the following:

- Greatest Need
- Behavioral Health
- Bay Special Care
- Cancer Care
- Heart Services
- Helen M. Nickless Volunteer Clinic

Name: _____

Phone #: _____

Address: _____

City/State/Zip: _____

Email: _____

- Check enclosed
(Payable to McLaren Bay Medical Foundation)
- Credit Card

No. _____

Exp. Date: _____ CVV Code: _____

Signature: _____

You may enclose a photo with a donation of your loved one or e-mail one to us. Please select **ONE** of the following:

- I have already sent a photo** in for previous Memorial Tree programs. Please use the photo that is already scanned into your computer system.
- I have enclosed a photo** to scan with my loved one's name printed on the back. Please mail it back to me when finished. (This will be scanned into our computer system to use for future Memorial Tree programs).
- I will e-mail a photo** to jessica.gregory@mclaren.org

Please make an appropriate selection(s):

My gift is In Memory of:
 In Honor of:

Name: _____

Notify: _____

Address: _____

City/State/Zip: _____

My gift is In Memory of:
 In Honor of:

Name: _____

Notify: _____

Address: _____

City/State/Zip: _____

My gift is In Memory of:
 In Honor of:

Name: _____

Notify: _____

Address: _____

City/State/Zip: _____

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