

THE 40TH ANNUAL *Tree of Life Illumination*

For 40 years, the Hanover Hospital Auxiliary has sponsored the Tree of Life project by placing lights on the evergreen tree on the corner of Charles Street and Highland Avenue. Each light represents an expression of appreciation, a celebration of a birth, or the memory of a loved one. Your donations help the Auxiliary support UPMC Hanover's special projects, as well as staff and patient programs. All donors and honorees will be recorded in the "Tree of Life" book to be displayed in the Main Lobby of the hospital during the holidays. If you desire, an acknowledgement card will be sent to the person being honored, or to the family of a person being remembered. New this year, add a personalized luminary to be displayed during the ceremony. Your loved one's name will shine in a glowing tribute of light!

To make your contribution, complete the attached form and return it to the Auxiliary or the Hospitality Shop with your donation by cash or check. Please feel free to duplicate this form to make as many requests as you desire. Please return it as soon as possible. If you have any questions, call the Auxiliary office at 717-316-2281.

Thank you for lighting our *TREE OF LIFE* again this year. On behalf of the Hanover Hospital Auxiliary, we extend to you and your family a warm, wonderful holiday season, filled with peace, joy, and love.

JOIN US DECEMBER 6TH AT 6 PM ON THE CORNER OF CHARLES STREET AND HIGHLAND AVENUE.

Hanover Hospital Auxiliary
Since 1925

Tree of Life Donation Form

Donor Name_____

Donor Address_____

_____

Donor Email: _____ Donor Phone: _____

❑ **$10 donation includes a symbolic light and acknowledgement card.**

❑ **NEW! $20 donation receives a symbolic light, acknowledgement card, and a personalized luminary.**

Please check one of the following that apply:

❑ In Honor of... ❑ In Memory of... ❑ In Appreciation of... ❑ Other: _____

Name of Honoree _____

❑ If you wish to have an acknowledgement sent to the honoree or family, please complete their information below:

Name of Recipient: _____

Address of Recipient: _____

Make checks payable to "Hanover Hospital Auxiliary" and mail to:
Hanover Hospital Auxiliary – ATTN: Tree of Life, 300 Highland Avenue, Hanover, PA 17331 • 717-316-2281