

# Moravian Care Foundation

## Your Pledge to Moravian Care Ministries

**Yes!** I want to help share God's love with seniors by making a gift/pledge of:

\$ \_\_\_\_\_ (Total gift) Amount enclosed now: \$ \_\_\_\_\_ Cash or check

**(Please make check payable to Moravian Care Foundation)**

Please accept this gift in support of:

- Auburn West – Skilled Nursing, Waconia
- Auburn Manor – Skilled Nursing, Chaska
- Auburn Courts – Assisted Living, Chaska
- Talheim Apartments, Chaska
- Marvel Heath Chapel, Chaska
- Capital Campaign – The Courtyard at Auburn – Memory Care Program, Chaska
- Capital Campaign – Auburn Home in Waconia
- Other (Please discuss with someone in the Foundation office and explain the designation.)

I intend to make payments over \_\_\_\_\_ months/years (up to 3 years), beginning \_\_\_\_\_, 20\_\_\_\_\_.

Payments of \$ \_\_\_\_\_ will be made (check one):

- Annually
- Quarterly
- Semi-annually
- Monthly

- I appreciate a reminder in advance of each pay period.
- Yes, I plan to make a gift through my estate or through another planned giving vehicle. (Please see "ways to make a gift".)
- Yes, I would like to make a gift in Memory/Tribute.
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### Memorial and Tributes:

*"Dying seems less sad than having lived too little." ~Gloria Steinem*

Memorials to Moravian Care Ministries may be given in memory of someone who has died, specified either for a division or program or to area of greatest need.

**Please complete the following Memorial or Tribute:**

In Memory of: \_\_\_\_\_

In Tribute to: \_\_\_\_\_

Would you like a letter announcing your commemorative gift to be sent to anyone? If so, please fill in the following:

Name:

\_\_\_\_\_

Address:

\_\_\_\_\_

City, State, Zip:

\_\_\_\_\_

I would like to remain anonymous.

I have completed the following as I want it to appear in Moravian Care Ministries donor records:

Donor(s):

\_\_\_\_\_

Address:

\_\_\_\_\_

City, State, Zip:

\_\_\_\_\_

Phone: \_\_\_\_\_ Email:

\_\_\_\_\_

Signature: \_\_\_\_\_ Date:

\_\_\_\_\_

**Please mail to:**

**Moravian Care Foundation Office  
501 N. Oak Street  
Chaska, MN 55318-2072**

Contributions to Moravian Care Foundation are tax deductible to the full extent allowed by law. A gift acknowledgement will be sent promptly. Thank you for ensuring an excellent quality of life for our community's aging adults.

**Moravian Care Ministries**

**A Call To Care**

Recognition Wall

Membership is based on cumulative giving.

<b>Caretaker</b> .....	\$100,000 and up
<b>Companion</b> .....	\$ 50,000-99,999
<b>Protector</b> .....	\$ 25,000-49,999
<b>Friend</b> .....	\$ 10,000-24,999
<b>Guardian</b> .....	\$ 5,000- 9,999
<b>Shepherd</b> .....	\$ 1,000 – 4,999