

# Pledge form



Name: \_\_\_\_\_ Department: \_\_\_\_\_

Location: \_\_\_\_\_ Employee ID: \_\_\_\_\_

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

**Make a donation** Check one and fill out the following instructions for that section:

☐ **Every paycheck (bi-weekly)**

**Pledge duration:**

- ☐ 1-year  
☐ Multi-year (2-9 years): \_\_\_\_\_

**Total per pay\*:\$** \_\_\_\_\_

\*Sample bi-weekly (per-pay) pledge totals:

\$2/pay = \$52/year  
\$5/pay = \$130/year  
\$20/pay = \$520/year  
\$73.66/pay = \$1915/year\*

\*Includes entry to Circle of 1915 and invite to annual reception.

**Fund designations**

Write the fund number and the amount you would like to donate from each paycheck:

Fund #	Amount per pay
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
<b>Total per pay*</b>	<b>\$</b> _____

☐ **One-time donation**

**Payment method:**

- ☐ Personal check or credit card  
(You will receive a pledge reminder and return envelope in January)  
or  
☐ One-time payroll deduction during the following month (choose one):  
☐ January\*  
☐ July\*

\*Month includes three paychecks.

**Fund designations**

Write the fund number and the amount you would like to donate to each fund:

Fund #	Amount per pay
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
<b>Total per pay*</b>	<b>\$</b> _____

☐ **I choose not to make a gift this year**

Thank you for participating in the personal giving program by letting us know your plans! If you change your mind, you can always make a gift later by contacting our team at: **313.876.1031** or **personalgiving@hfhs.org**.

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

**Questions?** Contact our team at: **313.876.1031** or **personalgiving@hfhs.org** for assistance, or visit **henryford.com/PersonalGiving** to learn more.

# List of most popular funds



## Henry Ford Brighton Center for Recovery

- 920 Associate Hardship Fund
- 875 Patient Aftercare Extended Fund
- 885 Therapy Dog Program Fund

## Henry Ford Genesys

- 801 Breast Cancer Fund
- 804 Friendship Fund
- 808 Patient Assistance Fund

## Henry Ford Hospital

- 575 Destination Grand - Henry Ford Hospital Detroit Campus Transformation
- 220 Emergency Department Renovation Fund
- 340 Tom Groth Patient Medical Needs Fund

## Henry Ford Jackson

- 732 Hospice Unrestricted Fund
- 718 Patient Immediate Needs Fund
- 721 SAFE Fund (Staff Assistance For Emergencies) Fund

## Henry Ford Macomb

- 352 Circle of Caring Fund
- 338 Employee Emergency-Seton Fund
- 345 Patient Medical Needs Fund

## Henry Ford Madison Heights

- 920 Associate Hardship Fund
- 930 HOPE Fund\*
- 914 Therapy Dog Program Fund

## Henry Ford Providence Novi

- 920 Associate Hardship Fund
- 821 Believe in Miracles Fund
- 846 HOPE Fund\*
- 858 Nurses Education and Special Needs Fund
- 885 Therapy Dog Program Fund

## Henry Ford Providence Southfield

- 920 Associate Hardship Fund
- 821 Believe in Miracles Fund
- 855 HOPE Fund\*
- 858 Nurses Education and Special Needs Fund
- 885 Therapy Dog Program Fund

## Henry Ford River District

- 920 Associate Hardship Fund
- 941 HOPE Fund\*
- 914 Therapy Dog Program Fund

## Henry Ford Rochester

- 900 Caregiver Support Fund
- 902 Employee Unlimited Potential Fund
- 903 Help Fund
- 904 Mental Wellness Fund
- 906 Nursing Support Fund
- 905 Therapy Dog Program Fund

## Henry Ford St. John

- 920 Associate Hardship Fund
- 958 HOPE Fund\*
- 961 Nursing Support Fund
- 962 Pediatrics and Pediatric ICU Fund
- 914 Therapy Dog Program Fund

## Henry Ford Warren

- 920 Associate Hardship Fund
- 930 HOPE Fund\*
- 914 Therapy Dog Program Fund

## Henry Ford West Bloomfield

- 644 Patient Medical Needs Fund
- 533 Random Acts of Kindness Fund
- 638 Wigs for Chemo

## Henry Ford Wyandotte

- 392 Henry Ford Cancer - Downriver Patient Needs Fund
- 378 Wyandotte Helping Hands Fund
- 370 Patient Medical Needs Fund

## System-Wide Funds - Henry Ford Health

- 630 Benson Ford Fund (Greatest Needs)
- 320 Bob and Sandy Riney Helping Hands Fund
- 825 Eastwood Recovery Center Fund
- 265 Game On Cancer Patient & Research Fund
- 105 Goldman Therapy Dog Program Fund
- 452 Northwest Region Patient Medical Needs Fund
- 462 Nursing Emergency Needs Fund
- 460 Nursing Professional Fund
- 470 Off Campus Patient Medical Needs Fund
- 101 Patient Medical Needs Fund

## Community Care Services

- 215 Community Care Services Each Patient First Fund
- 380 Hospice Fund
- 550 SandCastles Grief Support Program Fund
- 170 Senior Services Department Fund (PACE Southeast Michigan) Fund

## PPA

- 477 Personal Philanthropy Account
- Minimum \$1,915 annual donation through payroll deduction that can be designated throughout the year for event tickets, gifts in memorial or honor of, and more.

### Examples of gifts broken down per-pay-period for a full calendar year

Per-pay-period gift amount	Annual total gift
\$2	\$52
\$5	\$130
\$10	\$260
\$15	\$390
\$20	\$520
\$30	\$780
\$40	\$1,040
\$50	\$1,300
\$60	\$1,560
\$73.66	\$1,915

For more giving options or a full list of funds, scan this QR code.



Questions? Call **313.876.1031** or email [personalgiving@hfhs.org](mailto:personalgiving@hfhs.org).

\*HOPE - Helping Our Patients in Emergencies