



OVERLAKE Hospital Medical Center
 Medical excellence every day™

FOUNDATION & AUXILIARIES

OVERLAKE HOSPITAL AUXILIARIES DUES

Name: _____		Nickname: _____	
Address: _____			
City: _____		State: _____	Zip: _____
Home: (____) _____		Work: (____) _____	
Fax Number: (____) _____		Email: _____	
Birthday: ____/____ <small>Month/Day</small>		Spouse's Name: _____	

Please check the Auxiliary membership of your choice:

Cancer Center Auxiliary	A8669
Ed Fitzgerald Auxiliary	A8671-04
Elsie Barker Cancer Care Auxiliary	A8671-14
Gift Gallery Auxiliary	A8667
Jill Wikstrom Dreamcatchers Auxiliary	A8671-12
Roger Stark Cardiac/Stroke Auxiliary	S8671-13
Sonja Potter Senior Care Auxiliary	A8668
Specialty School Auxiliary	A8671-01

ANNUAL AUXILIARY MEMBERSHIP DUES - \$20.00

Active members participate in the activities of the Auxiliaries and maintain regular attendance at meetings. Cardiac members due will be effective through June 2009

SUSTAINING MEMBERSHIP DUES - \$50.00

Sustaining members are individuals who wish to be members but either cannot or do not wish to attend regular meeting. They must pay annual dues and shall be eligible to participate in all privileges and activities of the Auxiliaries. When absent, sustaining members do not count toward a quorum.

I am unable to join the Auxiliary but please accept my donation to support your work.

AMOUNT ENCLOSED: \$_____

Please return completed form with payment to:
 Overlake Hospital Auxiliaries, 1035 116th Avenue NE, Bellevue, WA 98004
 Please call 425-688-5529 or email auxiliaries@overlakehospital.org with any questions.