We are so indebted and think so highly of Fairfield Medical Center. If it hadn’t been for the hospital, Jerry wouldn’t be here today.”

– Beverly Messbarger, Wife of Grateful Patient

“I had one-of-a-kind care at FMC and, because of that, I will never go anywhere else.”

– Dylan Sharp, Grateful Patient

Fairfield Medical Center Foundation

Mission Statement

By cultivating opportunities for giving and acting as a steward of those gifts and endowments, we help the people of the communities we serve access quality healthcare services that promote prevention and encourage healthy behaviors.

If you wish to opt out of receiving fundraising requests for support from the Fairfield Medical Center Foundation, please call our office at 740-687-8107 and we will honor your request.

How can I say thank you?

Regardless of whether or not you are able to give financially at this time, we want to hear your story!

Please use the space below to send a message of thanks to an outstanding doctor or member of the Fairfield Medical Center team. We will forward your note of appreciation to him/her.

CAREGIVER NAME:

YOUR INFORMATION:

Name:

Address:

Phone:

Email:

Please check all that apply:

☐ I would like to attend a ceremony to recognize the outstanding care a member of the FMC team provided to me or a loved one.

☐ I would like to make a gift honoring my caregiver (see reverse side).

☐ I am not able to give financially at this time, but would like to be contacted concerning more opportunities to express my gratitude.

Please tell us why you would like to honor your caregiver:

________________________________________________________________________

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Please tell us why you would like to honor your caregiver:

________________________________________________________________________

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How can I say thank you?
We understand that saying thank you is a meaningful part of your healing process. It feels good to say thank you! People are more likely to have a positive physical and mental well-being when they are allowed to express their gratitude. When you join our Grateful Patient and Family Program, you have an opportunity to make a real difference. As a part of the program, you may acknowledge a caregiver with a special Legendary Caregiver recognition. Together, we have the ability to strengthen the health and well-being of our friends, neighbors, co-workers and loved ones today and for years to come. We want to hear your story.

How can I join the Grateful Patient and Family Circle?

Honor a staff member. Did a physician, nurse, staff member or volunteer make a difference for you or your loved one at FMC? Our caregivers go above and beyond the call of duty to make a real difference in patients’ lives. The caregiver you honor will be notified about your commendation and/or gift, and will receive a commemorative lapel pin, as well as your special message of thanks, if you choose to include one. The amount of your gift will not be disclosed.

Give a meaningful donation or commendation in their name today. Your gift, large or small, is powerful. It allows us to continue to invest in the latest healing technology and offer excellent care to every patient without exception.

Transform healthcare in your community. Donations made to this program help provide our physicians, nurses, technicians, therapists, staff members and volunteers with the tools and resources they need to deliver the best care possible. From new equipment to specialized patient care, your gift will help FMC fulfill its mission of providing high-quality healthcare to every patient who walks through our doors.

Please mail this form and tax-deductible gift to:
Fairfield Medical Center
Attn: Foundation
401 N. Ewing St.
Lancaster, OH 43130

OR
Complete the form online at fmchealth.org

What is the Grateful Patient and Family Program?
The Grateful Patient & Family Program is a meaningful way to show your thanks and celebrate the extraordinary care you or your loved one received while at Fairfield Medical Center.

Tell your story or make a financial gift to honor a caregiver. Stories and/or financial gifts will be used to further the care of other patients in many ways.

I am a Grateful Patient and would like to make a gift honoring my caregiver.

☐ Check here if billing address is the same as on reverse side.

Name:
____________________________________________________________________
Address:
____________________________________________________________________
Phone: ____________________________________________________________
Email: _____________________________________________________________

Enclosed is my gift of: (please check all that apply)
☐ $25  ☐ $50  ☐ $75  ☐ other: __________
☐ Please direct my gift to the area of greatest need.
☐ Please direct my gift to: __________

Payment Method:
☐ My check made payable to the Fairfield Medical Center Foundation is enclosed.
☐ My cash gift to the Fairfield Medical Center Foundation is enclosed.
☐ Please charge my: ☐ Visa ☐ Mastercard ☐ Discover

Card Number: ______________________________________________________
Security Code: __________ Expiration: __________
Signature: ________________________________