



# Giving Form

Please complete and print this form to make a gift to Texas Children's Hospital.  
**Thank you for your generous support!**

Donor/Company Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Email \_\_\_\_\_

**I would like to support Texas Children's Hospital with a gift of:**

- \$500
- \$100
- \$50
- \$25
- Other amount \_\_\_\_\_

**I would like my gift to support:**

- Where needed most
- Promise Campaign – Texas Medical Center Expansion (Legacy Tower)
- Jan and Dan Duncan Neurological Research Institute
- Charity Care
- Other Service or Department \_\_\_\_\_

**I would like my gift to be in honor or in memory of a special person:**

My gift is  in honor  in memory of

*(Please print name)*

**Please notify:**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

**Has anyone in your family received care at Texas Children's Hospital?**

- Yes
- No
- Child
- Grandchild
- Other \_\_\_\_\_

**Have you included Texas Children's Hospital in your will or estate plan?**

- Yes, I have included Texas Children's in my will or estate plan.
- Please send me information about including Texas Children's in my will or estate plan.

**Please send your completed form along with your gift to:**

Make check payable to  
**Texas Children's Hospital**

**MAIL:**  
Texas Children's Hospital  
Office of Philanthropy, Ste. 5214  
P.O. Box 300630  
Houston, TX 77230-0630

**FAX:**  
Secure fax for donations:  
832-825-1131

**Questions? Please call 832-824-6806 or email [RevenueOperations@texaschildrens.org](mailto:RevenueOperations@texaschildrens.org).**

*Detach and shred this portion immediately after payment is processed.*

**I would like to donate by:**

- Check enclosed
- AMEX
- Discover
- MasterCard
- Visa

Card number \_\_\_\_\_ Exp. \_\_\_\_ / \_\_\_\_

Signature *(required for all credit card charges)*

- Address on card is the same as address above
- My company will match my gift, and I have enclosed my company's matching gift form.
- I wish to donate anonymously.