

CALVARY HOSPITAL'S  
*Tree of Life*



Some gifts are for remembrance, some are in honor of a special person. Other gifts are an expression of thanksgiving that there is a Calvary Hospital and its mission — to give the finest medical, spiritual and emotional care to advanced cancer patients and their families — will continue and grow.

If you have any questions, or would like to discuss making your gift in several installments, please call: (718) 518-2077.



**CALVARY  
FUND INC**  
Of Calvary Hospital  
*Where Life Continues*

1740 Eastchester Road  
Bronx, NY 10461  
(718) 518-2077

[www.calvaryhospital.org](http://www.calvaryhospital.org)

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# CALVARY HOSPITAL'S Tree of Life

## A Unique Naming Opportunity

A gift to Calvary's Tree of Life ensures that a loved one's name will exist in perpetuity with the lifetime of the Hospital. This unique naming opportunity carries, therefore, special meaning for both the donor and the Hospital.

Because Calvary recognizes a donation to the Tree of Life as a named space, a minimum single donation of \$1,000 is required.

Calvary Hospital's Tree of Life is so much more than a beautiful sculpture by the renowned artist Hans Kraenzlein. Each part of the tree holds a special gift of love.

Becoming part of the Tree of Life is a most loving way of memorializing someone special to you or saying thank you, because your gift of love helps patients today and tomorrow by remembering yesterday.

That's why we call the sculpture the **Tree of Life** — it is a living tribute to the dignity of life.

**Through the Tree of Life, we can recognize your significant naming gift in a permanent and meaningful manner.**

## Tree of Life Gift

Please indicate your preference for recognition on the Tree of Life.

- SILVER LEAF \$1,000
- GOLD LEAF \$2,000
- STONE \$5,000
- PLAQUE \$10,000
- DOVE \$12,000
- TRUNK \$15,000

*Inscription (select one and please print)*

- 1. In loving memory of:**

\_\_\_\_\_

DATE OF BIRTH

DATE OF DEATH

- 2. In loving memory of:**

\_\_\_\_\_

- 3. In memory of:**

\_\_\_\_\_

- 4. In honor of:**

\_\_\_\_\_

- 5. Use the space provided below to create your own inscription. We ask that you use 12 words or less due to engraving space limitations.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*There are three separate locations for the Tree of Life at the Bronx campus. Please indicate your preference:*

- THE LOVINGER TREE**  
located in the Calvary Lobby
- THE MEYER TREE**  
located in the Calvary Lobby
- THE FARGIONE TREE**  
located in the Calvary Atrium



YOUR NAME (PLEASE PRINT)

ADDRESS

CITY

STATE

ZIP

TELEPHONE

E-MAIL

SIGNATURE

DATE

*Please make checks payable to Calvary Fund, Inc., and mail to:*

**Calvary Fund, Inc.**  
**1740 Eastchester Road, Bronx, NY 10461**

*Or, charge my credit card:*

- Visa  AMEX  MasterCard  Discover

CARD NUMBER

CVV CODE

EXPIRATION DATE

SIGNATURE

*Please send notification of my gift to:*

NAME (PLEASE PRINT)

ADDRESS

CITY

STATE

ZIP

- Please send me information on including Calvary in my Will and becoming a member of **The Society of 1899.***