

DEAR FRIENDS,

The time draws near for our annual *Hospice Illumination —A Celebration of Life*. We invite you to “light a light” to celebrate those whose lives you wish to honor and remember.

For each contribution of \$10 or more, a light will be placed on the Hospice Tree to shine in memory of your loved ones. For each light you sponsor, your honoree or the person you designate will receive a personalized card notifying them of your thoughtfulness.

In addition to celebrating the lives of some wonderful people, your gifts will reach out to touch others. Your donation sustains Hospice of the Piedmont in its mission to serve the community with hospice care and supportive services related to serious illness and loss, throughout central Virginia.

The tree will be lit at the Hospice Illumination ceremony and will stay lit until the New Year begins. Help us make the 2009 Hospice Illumination the brightest ever by completing the attached form and returning it with your check or credit card authorization.

I hope you’ll also plan to join us for the Illumination, an opportunity for Hospice staff and volunteers to remember the patients and families with whom we have shared life’s final journey. For you, the ceremony is an opportunity to celebrate those whose lives you’ve shared.

This year, for those who cannot join us on December 10, we’ve added an option for you to create a personal memorial at home. See details about ordering luminary kits on the reply panel of this brochure.

Thank you for your continuing support! I hope to see you at the 18th annual Hospice Illumination.

Sincerely yours,



Roberta White
Chief Executive Officer, Hospice of the Piedmont

Gifts must be received by November 20 to be acknowledged in the printed program.

Detach here and return this with your gift.

Yes, I plan to attend the 2009 Hospice Illumination.

No, I cannot attend this year’s Hospice Illumination.

Please send me a luminary to light at home.

We request but do not require an additional \$2 to cover the cost of postage and handling for a luminary kit. We invite you to light your personal, memorial luminary on Thursday, December 10, 2009 at 7:00pm, when we will be illuminating the Hospice Tree at First Presbyterian Church.

**FOR EACH GIFT OF \$10 YOU CAN SPONSOR
A LIGHT ON THE HOSPICE TREE**

I would like to sponsor a total of _____ lights.

Donor Name(s) *Include spouse if both should receive credit.*

Address

City/State/Zip

Telephone Number

Email Address

Enclosed is my check for \$ _____
made payable to **Hospice of the Piedmont**.
*If you’ve requested a luminary kit to create and light at home,
please consider adding at least \$2 to cover the cost of the kit.*

Please charge my gift of \$ _____
to my Visa Mastercard

Account Number

Exp. Date

Signature (required)

Check here if you do not want your name listed in the program.

PLEASE RETURN THIS FORM ALONG WITH YOUR GIFT TO:

The Hospice Illumination
Hospice of the Piedmont
675 Peter Jefferson Parkway, Suite 300
Charlottesville, VA 22911
Call (434) 817-6939 with questions.

{1} PERSON FOR WHOM LIGHT IS GIVEN:

In Memory *In Honor*

Person to be informed of my gift:

Name

Address

City/State/Zip

My signature on card should read

{2} PERSON FOR WHOM LIGHT IS GIVEN:

In Memory *In Honor*

Person to be informed of my gift:

Name

Address

City/State/Zip

My signature on card should read

{3} PERSON FOR WHOM LIGHT IS GIVEN:

In Memory *In Honor*

Person to be informed of my gift:

Name

Address

City/State/Zip

My signature on card should read

{4} PERSON FOR WHOM LIGHT IS GIVEN:

In Memory *In Honor*

Person to be informed of my gift:

Name

Address

City/State/Zip

My signature on card should read

{7} PERSON FOR WHOM LIGHT IS GIVEN:

In Memory *In Honor*

Person to be informed of my gift:

Name

Address

City/State/Zip

My signature on card should read

HOSPICE OF THE
PIEDMONT
Illumination
A CELEBRATION OF LIFE

YOU ARE INVITED TO:

LIGHT A LIGHT
IN CELEBRATION OF A LIFE

AND TO ATTEND THE

HOSPICE ILLUMINATION CEREMONY

THURSDAY, DECEMBER 10, 2009

6:30 P.M.

FIRST PRESBYTERIAN CHURCH

500 PARK STREET

CHARLOTTESVILLE, VIRGINIA



{5} PERSON FOR WHOM LIGHT IS GIVEN:

In Memory *In Honor*

Person to be informed of my gift:

Name

Address

City/State/Zip

My signature on card should read

{8} PERSON FOR WHOM LIGHT IS GIVEN:

In Memory *In Honor*

Person to be informed of my gift:

Name

Address

City/State/Zip

My signature on card should read

{6} PERSON FOR WHOM LIGHT IS GIVEN:

In Memory *In Honor*

Person to be informed of my gift:

Name

Address

City/State/Zip

My signature on card should read

{9} PERSON FOR WHOM LIGHT IS GIVEN:

In Memory *In Honor*

Person to be informed of my gift:

Name

Address

City/State/Zip

My signature on card should read