

# Mary Washington Hospital Auxiliary

## *Thirty-Ninth Annual Tree of Lights*

**Tuesday, December 5, 2023**

For thirty-eight years, Mary Washington Hospital Auxiliary (MWH Auxiliary) has gathered with friends and family to honor loved ones during the Mary Washington Hospital Auxiliary Annual Tree of Lights. We are pleased to announce that we will have an indoor gathering for the annual tree lighting on Tuesday, December 5, 2023, at 6:00 p.m. in the MWH rear atrium. Light refreshments will be served.

Proceeds from the Annual Tree of Lights benefit programs and services within Mary Washington Healthcare's Regional Cancer Center. Some examples include complementary therapies such as art, music, massage to help improve quality of life for patients; counseling and navigator services to help patients better understand their disease and treatment options; and personal care services to help improve self-image and recovery time. MWH Auxiliary has raised over \$2 million over the past fourteen years through the generosity of our community and wishes to continue financial support of this worthwhile cause for years to come.

If you would like to sponsor a light for the tree to recognize a loved one, please complete the information on this flyer and return it to us, along with a minimum contribution of \$20.00 per light. Tax ID# is 75-2985923.

The names of those you wish to recognize will be recorded in the Annual Tree of Lights memory book and displayed at the entrance to MWH Auxiliary's Meditation Garden. To ensure the name(s) you are recognizing are recorded in the Tree of Lights memory book prior to the tree lighting, please have your contribution returned to us no later than Friday, December 1, 2023. Contributions received after that date will be updated in the book on a weekly basis. Mail your completed form, along with a check made payable, to MWH Auxiliary at your earliest convenience to:

MWH Auxiliary  
Volunteer Services  
Mary Washington Hospital  
1001 Sam Perry Blvd.  
Fredericksburg, VA 22401

You may also drop off the completed form and make payment in the Mary Washington Hospital Gift Shop, located in the main atrium of Mary Washington Hospital. *For more information, please contact the MWH Volunteer Services office at 540.741.1440.*

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**Please print your name below the way you would like it to appear in the book.**

Donor's Name \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Total Donation \$\_\_\_\_\_ (minimum donation of \$20 per light)

## Tree of Lights - Please Print Clearly

In Honor of a loved one who is living.

In Honor of \_\_\_\_\_

Address \_\_\_\_\_

Email: \_\_\_\_\_

In Memory of a loved one who is deceased.

In Memory of \_\_\_\_\_

Person to be informed of gift (if desired):

Name \_\_\_\_\_

Address \_\_\_\_\_

Email: \_\_\_\_\_

In Honor of a loved one who is living.

In Honor of \_\_\_\_\_

Address \_\_\_\_\_

Email: \_\_\_\_\_

In Memory of a loved one who is deceased.

In Memory of \_\_\_\_\_

Person to be informed of gift (if desired):

Name \_\_\_\_\_

Address \_\_\_\_\_

Email: \_\_\_\_\_

In Honor of a loved one who is living.

In Honor of \_\_\_\_\_

Address \_\_\_\_\_

Email: \_\_\_\_\_

In Memory of a loved one who is deceased.

In Memory of \_\_\_\_\_

Person to be informed of gift (if desired):

Name \_\_\_\_\_

Address \_\_\_\_\_

Email: \_\_\_\_\_

*Thank you for your generous support.*



**Mary Washington  
Hospital Auxiliary**