



Canton Potsdam Hospital Guild - Home (cphguild.com)
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2021-22 MEMBERSHIP DRIVE

Dear Friends:

Our world looks different, our lives look different and how we conduct business as a Guild looks different in 2021. Please take this opportunity to become a Guild member, renew your membership, or pass this information along to a friend. Our mission is to provide support to Canton-Potsdam Hospital and its patients, and assist in promoting the health and welfare of the community in accordance with the goals of the hospital. Last year our donation in the amount of \$10,000 represented support of capital budget projects. In addition, the Guild funded the Canton College Foundation Nursing Student Scholarships totaling \$4,000 and the prescription assistance program.

The success of our fundraisers, Gift Shop, community events, and other activities is attributed to your dedication and donations of time and financial assistance. We are looking forward to the opening of our Gift Shop in the hospital in the near future. Thank you to all who value and support the Guild's initiatives.

Below is the Membership Form for 2021-22. We hope you will take time to complete it and return to the Canton-Potsdam Hospital Guild address listed. You will receive a Membership Card/Receipt once your dues/donation is recorded. If you include your email, we will keep you updated as things return to "normal" and we can host fundraisers and hold community events. Again, thank you for your past support, and the Guild Board looks forward to having you join us in the coming year.

Sincerely,
Membership Committee

MEMBERSHIP DUES
2021-22 Membership Year

Name(s) Phone

Address Email

Please indicate the area(s) where you may be able to help, and we will notify you as the event date draws closer.

- Board Membership Gift Shop Volunteer Community Outreach Programs
Golf Tournament Soup Luncheon Others as may arise

Although unable to participate in events/programs at this time, I/we desire to support the Guild.

- \$10 Dues
\$ Donation also included (tax deductible)
\$ Butterfly Garden Maintenance Donation
\$ TOTAL

(completed by Treasurer: Date Received Cash Check#)
(completed by Membership Committee: Date Recorded Receipt Sent)

Return to: CANTON-POTSDAM HOSPITAL GUILD * P.O. BOX 5184 * POTSDAM, NY 13676