



Women
OF HOPE



Lexington Medical Center Foundation



Women of Hope is an exciting new project of the Lexington Medical Center Foundation that brings women together to impact the health of our community.

Membership is open to all women throughout the Midlands who want to reach out to patients in need and help the community. Hosting special events and networking opportunities throughout the year, Women of Hope builds community among its members and raises awareness of critical health issues impacting women and their families.

We are able to meet many needs of women in the Midlands through membership contributions. These needs include medication and treatment for low-income families, critical support to those suffering from life-threatening illnesses and preventative services.

Women of Hope unites the time, talents and resources of local women to benefit the health and wellness of women and families throughout our community. We hope that you will consider joining us!

Benefits

The greatest benefit of joining Women of Hope is knowing that 100% of your membership gift supports the health care needs of our community. Members also receive invitations to “lunch and learns” and other events throughout the year that focus on women’s health.

Contribution Levels

SUPPORTER ~ \$100

This level is offered to founding members during the inaugural year.

- Invitations to all meetings, receptions and special events
- Opportunity to serve on committees and vote on the group’s focus areas
- Invitation to women’s health care awareness events

SUSTAINER ~ \$500 AND ABOVE

- Invitations to all meetings, receptions and special events
- Two tickets and preferred seating at the Women of Hope’s annual meeting
- Invitation to a special Sustainer Reception once a year
- Opportunity to serve on committees and vote on the group’s focus areas
- Invitation to women’s health care awareness events

*For more information
about Women of Hope, contact
the Foundation at (803) 791-2540 or
visit www.lmcfoundation.com.*

How to Join

Complete the form below and return to the Lexington Medical Center Foundation at 2720 Sunset Blvd., West Columbia, SC 29169 or fax to (803) 936-8066.

Please select a contribution level.

Supporter

(\$100/annually)

Sustainer

(\$500/annually)

Name: _____

Address: _____

City: _____

State: _____ ZIP: _____

Home Phone: _____

Office: _____ Cell: _____

Email: _____

Please select a method of payment.

Invoice: Annually Quarterly

Check: Please make check payable to the
Lexington Medical Center Foundation

Credit Card: VISA MasterCard Discover

Credit Card Number: _____

Expiration Date (MM/YY): _____ / _____

Signature: _____

Date: _____

Lexington Medical Center Foundation is a 501(c)(3) non-profit organization. Donations are tax deductible to the fullest extent allowed by the law. Please call the Foundation at (803) 791-2540 with questions.

