



Fulfilling Our Promise:
Educating a new generation of health care leaders and practitioners

CONTRIBUTION FORM

Thank you for your generous, tax-deductible contribution to Maryland University of Integrative Health. Please fill out this form to make your contribution.

To discuss your donation, please contact development@muih.edu or Cheryl Walker at 410-888-9048 ext. 6695.

Gift of Partnership

I would like to give the following Gift of Partnership:

The Gift of Learning

Your donation helps support students in receiving an "Exceptional Student Experience," which includes the continued building of a world class faculty, deepening the well of resources in the Sherman Cohn Library, and ongoing capacity building of technology for campus-based and online learning and services.

The Gift of Practice

Your donation helps the evolution of our Natural Care Center and student teaching clinic into a state-of-the-art integrative healthcare center. Few exemplary models of innovative team care and client-focused approaches to healing exist today. As the leading university for integrative health in the nation, it is up to us to pave the way. Our very own integrative health center will provide clients with world class care and students with even more real world experience.

The Gift of Research

Your donation helps to establish a formal university research program. There is no doubt that we have been doing life changing work in healing for nearly 40 years. Our clients, students, and faculty know it for sure. To have a more far-reaching impact, we must conduct original research on the effectiveness and safety of integrative healthcare approaches that will further validate these treatments and support the use of complimentary therapies and integrative practices.

The Gift of Scholarship

Your donation toward an existing scholarship or toward establishing a new one will help offset the cost of our students' tuition, making possible an education for those unable to afford one. Most importantly, this will help more students realize their most deeply held dreams of being a healer and enter into service of others.

At the level of:

- \$100
- \$250
- \$500
- \$1,000
- \$5,000
- \$10,000
- \$20,000
- Other \$ _____

Gift of Legacy

Your donation can create a meaningful, visible, and lasting legacy for yourself and your loved ones through the naming opportunities now available.

I would like to give the following Gift of Legacy:

- The University: \$25 million
- School of Professional Studies: \$2.5 million
- On-Line Campus: \$2 million
- Career Service Center: \$1 million
- Natural Care Center (NCC): \$1 million
- NCC Large Core Group Room: \$150,000
- NCC Small Core Group Room: \$100,000
- NCC Treatment Room: \$50,000
- Student Teaching Kitchen: \$1 million
- Student Lounge: \$200,000
- Lobby: \$500,000
- The Meeting Point: \$500,000
- The Herbal Dispensary: \$500,000
- Small Classroom: \$100,000
- Large Classroom: \$200,000
- Herb Garden: \$100,000
- Labyrinth: \$30,000
- Technology Center: \$700,000

University Circle

As a member of this core influential group, you become a key supporter in assisting the University to realize its full potential. Your generous gift of \$100,000 or more, paid over a period of two years, invests in our university vision as being a leader in the global transformation of health and wellness.

Additional Benefits:

- Invitation to annual University Circle Dinner
- Invitation to meet Integrative Health Thought Leaders
- Name on our University Circle wall of appreciation

I would like to join the University Circle at the level of:

\$ _____

Contributor Information

Title _____ First Name _____ Last Name _____

Company Name (if applicable) _____

Street Address 1 _____

Street Address 2 _____

City _____ State _____ Zip _____

Phone _____ Email _____

Acknowledgement

Please list your name as you would like it to appear in University publications:

Name _____

My gift is:

In memory of _____

In honor of _____

I would like to remain anonymous

Your Affiliation with MUIH

- | | |
|---|--|
| <input type="checkbox"/> Alumni | <input type="checkbox"/> Friend |
| <input type="checkbox"/> Student | <input type="checkbox"/> Parent of Student |
| <input type="checkbox"/> Natural Care Center Client | <input type="checkbox"/> Spouse of Student/Staff/Faculty |
| <input type="checkbox"/> Faculty/Staff | <input type="checkbox"/> Other _____ |

Corporate Matching Gifts

Many employers will match charitable contributions made by their employees. Check with your human resources or personnel department to determine if that option exists for you.

- My (or my spouse's/partner's) company has a matching gift program. (Please attach the appropriate form)

Billing Information

Check enclosed.

Please make payable to Maryland University of Integrative Health.

Please charge my credit card for the amount indicated on page one. That amount is \$ _____.

Cardholder's Name _____

Credit Card Number _____

Card Expiration: Month _____ Year _____

Card Security Code _____

Signature _____

Forms can be mailed or faxed to our secure fax number.

Fax Number: (410) 888-9239

Mailing Address:

Maryland University of Integrative Health

ATTN: Cheryl Walker

Vice President of Institutional Development and Chief Values Officer

7750 Montpelier Road

Laurel, MD 20723

Thank you, again, for your generous support of Maryland University of Integrative Health. We welcome your questions about our current programs and future plans. Please contact development@muih.edu or 410-888-9048 ext. 6695 for more information.

Maryland University of Integrative Health

7750 Montpelier Road
Laurel, Maryland 20723
410-888-9048
www.muih.edu

Maryland University of Integrative Health (MUIH) is a 501(c)(3) nonprofit organization and donations are tax deductible to the fullest extent allowed by law.

A copy of our current financial statement is available upon request by contacting MUIH at 7750 Montpelier Road, Laurel, MD 20723, 410-888-9048. Documents and information submitted to the State of Maryland under the Maryland Charitable Solicitations Act are available from the Office of the Secretary of State for the cost of copying and postage.