

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	n, please contact development@m	uih.edu or Cheryl Walker at 410-888-9048 ext. 6695.
Gift of Partnership	p	Gift of Legacy
I would like to give the following Gift of Partnership:		Your donation can create a meaningful, visible, and lasting legacy for
☐ The Gift of Learning Your donation helps support students in receiving an "Exceptional		yourself and your loved ones through the naming opportunities now available.
Student Experience," which inc	cludes the continued building of a world	I would like to give the following Gift of Legacy:
class faculty, deepening the well of resources in the Sherman Cohn		☐ The University: \$25 million
Library, and ongoing capacity	building of technology for campus-based	☐ School of Professional Studies: \$2.5 million
and online learning and service	es.	☐ On-Line Campus: \$2 million
		☐ Career Service Center: \$1 million
☐ The Gift of Practice		☐ Natural Care Center (NCC): \$1 million
Your donation helps the evolution of our Natural Care Center and		☐ NCC Large Core Group Room: \$150,000
student teaching clinic into a state-of-the-art integrative healthcare		☐ NCC Small Core Group Room: \$100,000
center. Few exemplary models of innovative team care and client-		□ NCC Treatment Room: \$50,000
focused approaches to healing	exist today. As the leading university for	☐ Student Teaching Kitchen: \$1 million
integrative health in the nation	n, it is up to us to pave the way. Our very	☐ Student Lounge: \$200,000
own integrative health center will provide clients with world class care		□ Lobby: \$500,000
and students with even more	real world experience.	☐ The Meeting Point: \$500,000
		☐ The Herbal Dispensary: \$500,000
☐ The Gift of Research		☐ Small Classroom: \$100,000
Your donation helps to establish a formal university research program.		☐ Large Classroom: \$200,000
There is no doubt that we have been doing life changing work in		☐ Herb Garden: \$100,000
healing for nearly 40 years. Our clients, students, and faculty know it		☐ Labyrinth: \$30,000
for sure. To have a more far-reaching impact, we must conduct original		☐ Technology Center: \$700,000
	and safety of integrative healthcare	
approaches that will further validate these treatments and support the		University Circle
use of complimentary therapies and integrative practices.		As a member of this core influential group, you become a key supporter in assisting the University to realize its full potential.
☐ The Gift of Scholarship		Your generous gift of \$100,000 or more, paid over a period of two
Your donation toward an existing scholarship or toward establishing		years, invests in our university vision as being a leader in the global
a new one will help offset the cost of our students' tuition, making		transformation of health and wellness.
possible an education for those unable to afford one. Most importantly,		
this will help more students realize their most deeply held dreams of		Additional Benefits:
being a healer and enter into service of others.		Invitation to annual University Circle Dinner
At the level of:		Invitation to meet Integrative Health Thought Leaders
□ \$100	□ \$5,000	Name on our University Circle wall of appreciation
□ \$250	□ \$10,000	
□ \$500	□ \$20,000	I would like to join the University Circle at the level of:
□ \$1,000	☐ Other \$	\$

Contributor Information

Title First Name		ast Name
Company Name (if applicable) _		
Street Address 1		
		State Zip
		Email
Acknowledgement Please list your name as you would like it to appear in University publications:		Billing Information ☐ Check enclosed. Please make payable to Maryland University of Integrative Health.
□ Name		☐ Please charge my credit card for the amount indicated on page
☐ My gift is:		one. That amount is \$
☐ In memory of		Cardholder's Name
☐ In honor of		Credit Card Number
☐ I would like to remain anonymous		Card Expiration: Month Year
Your Affiliation with MUIH ☐ Alumni ☐ Friend ☐ Student ☐ Parent of Student	Card Security Code Signature	
□ Natural Care Center Client□ Faculty/Staff	☐ Spouse of Student/Staff/Faculty☐ Other	Forms can be mailed or faxed to our secure fax number. Fax Number: (410) 888-9239
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)		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.