



# FRIENDSHIP FORM



YES, I would like to put "life into their days, not just days into their life"

Please accept my donation of:

INDIVIDUAL MEMBERSHIP

INDIVIDUAL 5YRS

ANNUAL CORPORATE

CORPORATE 5 YRS

Ksh 1,000

Ksh 5,000

Ksh 10,000

Ksh 50,000

Other donation for patient care services(Optional).....

My cheque, money order, postal order payable to **NAIROBI HOSPICE** is enclosed

Please mail to:

Philip J. Ransley  
Chairman  
Fundraising Committee  
Nairobi Hospice  
P. O. Box 74818, 00200  
Nairobi.  
Tel:020-2712361/020-02726502

Name:.....

P. O. Box ..... Tel:.....

Fax..... Email:.....

*Funds received are used for patient care support*

*All donations however small will be highly appreciated and gratefully acknowledged.*