

LEGACY *for* LIFE

At its 2013 National Conference in Chicago, Illinois, the American Society of PeriAnesthesia Nurses (ASPAN) introduced a new lifetime giving program. The program is open to all individuals and components to foster ongoing support for the preservation and advancement of the Society. Specific gifts to ASPAN beginning April, 2013, are all automatically credited toward this program. Individuals who reach the momentous level of \$5,000 of support—and components that reach \$10,000 of support—are then officially named and introduced as members of the Legacy for Life program.

In addition to making a significant, lasting impact upon ASPAN and its vital mission, benefits of membership are extensive and include:

- > Formal installation at a ceremony during National Conference, including presentation of the Legacy for Life medallion
- > Annual recognition in the National Conference syllabus
- > Inscription of your name on a plaque displayed prominently in the National Office
- > Complimentary lifetime membership to ASPAN (for individuals)



ASPAN

American Society of PeriAnesthesia Nurses

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www.aspan.org



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ASPAN

American Society of PeriAnesthesia Nurses

THE *Mission*

The Legacy for Life program supports the future of perianesthesia nursing through significant, enduring contributions that are applied to perianesthesia education, research, practice, and standards.

SUPPORT THE MISSION

Individual contributions to the following are applied toward this program:

- > Hail, Honor, Salute! campaign
- > Development contributions made when renewing dues
- > Other gifts specifically designated for Legacy for Life

Component contributions to the following are credited towards this program:

- > Hail, Honor, Salute! campaign
- > Support for National Conference
- > Other gifts specifically designated for Legacy for Life

The minimum aggregate contribution to become a member is \$5,000 for individuals and \$10,000 for components.

For additional information, please contact Arianna Bender, Marketing and Communications Manager, at the National Office at abender@aspan.org or 877.737.9696, ext. 215.

Corporations may also support the Society and its core purpose by becoming a member of ASPAN's Corporate Partnership Program.



LEGACY *for* LIFE *Contribution Form*

Donor's Name _____

Name Submitting Form _____
(if different from Donor)

Email _____

Address _____

City _____

State _____ Zip _____

Phone _____

My contribution is: \$ _____

MY METHOD OF PAYMENT

- ☐ My check to ASPAN is enclosed
☐ Charge my credit card
☐ Visa ☐ MasterCard ☐ American Express

Card Number _____

Expiration Date _____

Signature _____
(required of credit card donations)

PLEASE MAIL OR FAX DONATIONS TO:

ASPAN
90 Frontage Road
Cherry Hill, NJ 08034
Attn.: Legacy for Life
Phone: 877.737.9696, ext. 215
Fax: 856.616.9601