



Rathgeber Hospitality House

“Healthcare Hospitality with a Heart”

Honorarium and Memorial Gift Form

Please print and complete this form and send it with your gift to:

Rathgeber Hospitality House
1615 12th Street ~ Wichita Falls, Texas 76301
940-764-2400

Your Name: _____

Street Address: _____

City – State – Zip _____

Phone Number: _____

Email Address: _____

Honorarium Gift

This gift is in honor of _____

On the occasion of _____

Memorial Gift

This gift is in memory of _____

Please send acknowledgement (no mention of amount) to:

Name _____

Street Address _____

City – State – Zip _____

Payment Information

Enclosed is check # _____ in the amount of \$ _____

Please make a one-time monthly charge in the amount of \$ _____ to the following:

Visa MasterCard American Express Discover

Credit Card # _____ Expiration Date _____

Signature of cardholder _____