

WHAT IS W.H.A.T. CLUB?

W.H.A.T. Club represents the Tri-State Memorial Hospital employees who donate annually to the Tri-State Hospital Foundation. Those employees set an example for the community by pledging their own support and encouraging the community to do the same.

WHY DOES THE HOSPITAL NEED YOUR SUPPORT?

There are many charitable organizations in the community that we can choose to support. Many individuals often forget their own employer, like Tri-State, is also a non-profit community organization that will benefit from our giving. With generous support of community members like you, we can continue to provide high quality healthcare to our patients.

WILL YOUR GIFT HELP?

Yes, every dollar makes a difference! Over the last ten years, W.H.A.T. Club has raised over \$397,335 and donated \$149,409 in projects to help improve employee, patient, and visitor experience at Tri-State Memorial Hospital.

HOW CAN YOU SUPPORT?

Use the attached pledge card and make a pledge in the amount you wish to give either through a single donation, a one-time paid time off donation, or through payroll deduction. Your donation amount will be kept confidential. If we do not hear from you about your annual W.H.A.T. Club donation, your gift will be automatically renewed.

DO EMPLOYEE DONORS RECEIVE RECOGNITION?

Employees will receive a specially designed badge charm and will be invited to exclusive appreciation events throughout the year.

WHAT SHOULD YOU GIVE?

There is a minimum of \$2 per pay check or four hours paid time off donated. W.H.A.T. Club's goal is 100% employee participation. All contributions are tax deductible to the amount permitted by law.

GIVING GUIDE FOR PAYROLL DEDUCTION PER PAY PERIOD

(\$2 per pay period minimum required)

AMOUNT PER PAY PERIOD	TOTAL FOR 1 YEAR OR 26 PAY PERIODS
\$2	\$52
\$4	\$104
\$5	\$130
\$10	\$260
\$15	\$390
\$20	\$520
\$25	\$650
\$30	\$780
\$35	\$910
\$40	\$1040
\$42	\$1092
\$45	\$1170
\$50	\$1300

WE HELP ACHIEVE TOMORROW
W.H.A.T. CLUB

W.H.A.T. CLUB PLEDGE FORM

Want to join W.H.A.T. Club or need to make changes? Please fill out form below.

Option 1 – Payroll

I give Tri-State Memorial Hospital & Medical Campus authorization to deduct the following amount (please check the box below that coincides with your donation selection and specify amount to be given):

- ☐ \$ _____ per pay period
(minimum of \$2 per pay period)
- ☐ One-Time Donation of \$ _____ on
the first pay period the next January
- ☐ _____ paid time off hours*
(minimum of four hours paid time off)

Option 2 – Cash/Check

I would like to make a one-time gift of:

- ☐ \$10 ☐ \$25 ☐ \$50 ☐ \$100 ☐ \$ _____

Option 3 – Credit Card

To make a gift by credit card, please visit [Insert URL](#).

Name _____

Department _____

- ☐ Please keep my donation anonymous

Address _____

City, State, Zip _____

Email _____

Phone _____

Signature _____

Date ____/____/____

Please return this pledge form to the Tri-State Hospital Foundation's inter-office mailbox.

Questions? Please contact the Foundation at 509.758.4902 or foundation@tsmh.org.

**Same rules and conditions apply as paid time off cash out:*

- Tri-State Hospital Foundation can only accept paid time off as it is being accrued
- Once the donated hours have been reached a check will be made to the Tri-State Hospital Foundation
- For more information on paid time off cash out please refer to PolicyStat



Tri-State Hospital Foundation serves as the thoughtful steward of all contributions and coordinator of fundraising efforts for Tri-State Memorial Hospital & Medical Campus.

MISSION

Tri-State Hospital Foundation is devoted to helping Tri-State Memorial Hospital place people and their health as the first priority.

VISION

Tri-State Hospital Foundation is committed to providing the link between our community and healthcare for today and tomorrow.
"Today's Investment in Tomorrow's Health"



WE **W** **H** **A** **T** **ACHIEVE** **TOMORROW** **CLUB**

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