Cornerstone Partners is a group of businesses interested in Unity Health and in continuing the provision of quality healthcare services. Members make a three year pledge to the Unity Health Foundation. These funds are directed by the Unity Health Foundation Board and Development Council to support projects and programs in the effort to enhance healthcare in our community.

Your business is cordially invited to become a member of Cornerstone Partners and participate in the exciting future of Unity Health. As a member, you will join a group of civic-minded businesses that value Unity Health as a cornerstone of quality healthcare in the community and one of the area’s most valuable resources.

The members of Cornerstone Partners serve as an important part of the overall solution. Together, they support the Unity Health Foundation in providing funds not otherwise available to Unity Health, making possible significant and exciting health and wellness improvements in our community.

Cornerstone Partners is one of several fundraising activities organized by the Development Council of the Unity Health Foundation.

The mission of Unity Health is to improve the quality of health and well-being for the communities we serve through compassionate care. As the largest employer in an eight-county area with more than 2,000 associates, Unity Health associates and partners strive to create a healthy community by creating a healing environment that enables people to reach their highest potential for health.

1200 South Main
Searcy, Arkansas 72143
(501) 278-3191
foundation@wcmc.org
Facebook: Unity-Health.org
You’re Invited To Be A Part Of An EXCITING FUTURE

Unity Health Foundation is a not-for-profit corporation established as a charitable organization to provide support to Unity Health. The Foundation is committed not only to medical excellence and compassionate care, but also to improving the overall health of the entire Unity Health service area.

Gifts to the Unity Health Foundation provide Unity Health with funds for renovations, state-of-the-art equipment and specialized projects to enhance patient care. Resources for the Foundation are obtained from donations, memorial gifts, planned gifts, special events and other sources. The Unity Health Foundation works to develop a lasting partnership with the community to preserve, sustain and develop Unity Health for years to come.

Membership Benefits
In recognition of you choosing to contribute to the good health of your community by making an annual financial gift to the Unity Health Foundation.

- Your name will be recognized in Foundation and hospital publications.
- You will be an invited guest to an annual event for Cornerstone Partners members where you will receive a special gift recognizing your contribution.
- You will be invited to other special events & programs offered by Unity Health Foundation.

A Special Mission
Unity Health associates and partners through a spirit of servanthood are committed to the continuous improvement of quality patient care, the provision of highly satisfied patient care at reasonable prices, the maintenance of an adequate margin for reinvestment in new technology, facility improvements, human resources, and a leadership role for positive change in the healthcare environment.

Membership ENROLLMENT

I/We accept your invitation to become a member of Cornerstone Partners & would like our gift to benefit (please check a campus below)

- Unity Health – White County Medical Center
- Unity Health – Harris Medical Center

Our Company pledges over three years, $__________ (total amount) to the improvement of our community’s healthcare through Cornerstone Partners

- Diamond $20,000 or above
- Silver $3,000 - $4,999
- Platinum $10,000 - $19,999
- Bronze $1,500 - $2,999
- Gold $5,000 - $9,999

- The first payment towards our pledge is enclosed
- I/We would like to be invoiced for our pledge in ____________ (month)

Please send a reminder of payment
- Annually
- Semi-annually
- Quarterly

Please PRINT name(s) as you would like for it to appear for recognition purposes

Company Name ____________________________
Representative ____________________________
CEO’s Name: _______________________________
Address ___________________________________
City _______________________________________
State ___________________ Zip _____________
Phone __________________________ Email __________

Please make checks payable to Unity Health Foundation
Please return membership enrollment form & donation to
Unity Health Foundation
1200 South Main
Searcy, AR 72143