

# Baby Waves

The birth of a baby is a wondrous event. Capital Health is honored to celebrate the joy of new life with you and to be a part of this precious moment.

The **Baby Waves** wall is a great way for proud parents, grandparents, aunts, uncles and friends to welcome your new addition by inscribing the name and birthdate on a whimsical fish.

Guppy	\$ 250
Sailfish	\$ 500
Whale	\$ 1,000

The Baby Waves wall also serves as a loving tribute for those who wish to commemorate the life of a child.

Your gift will support our Newborn Nursery and Neonatal Intensive Care Unit helping to ensure the health and well-being of the mothers and babies we serve.



Development Office  
Two Capital Way, Suite 361  
Pennington, NJ 08534  
609.303.4121

# Baby Waves

We honor the small miracles who began their lives at Capital Health.

## Enclosed is my/our gift of:

\$250 Guppy     \$500 Sailfish     \$1,000 Whale

## Please inscribe the following:

(Line 1 limited to 26 characters including punctuation and spaces.)

-----  
Baby's Name (Please print)

-----  
Date of Birth (MM-DD-YY)

## Donor Information

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

\_\_\_\_\_  
Relationship to Baby

This is a memorial gift.

Please send notification of this tribute to:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

If you would like to include a special note, please send it with this form.

## Please designate my/our donation to:

Newborn Nursery     Neonatal Intensive Care Unit     Split equally

## Method of Payment:

Check (payable to Capital Health)  
 Visa     MasterCard     Amex     Discover

\_\_\_\_\_  
Account #

\_\_\_\_\_  
Exp. Date

\_\_\_\_\_  
Security Code

\_\_\_\_\_  
Name on Card

\_\_\_\_\_  
Billing Zip

If you wish to be removed from our mailing list for invitations and other related fundraising activities, please call 609.303.4121, send a written request with your name and address to Capital Health Development Office, Two Capital Way, Suite 361, Pennington, NJ 08534, or e-mail your request to [donate@capitalhealth.org](mailto:donate@capitalhealth.org).