



The Benefactors' Society is an opportunity that allows individuals to invest in perioperative nursing through the AORN Foundation. Your annual donation will enable the Foundation to provide academic scholarships, professional development grants, and research for nurses to advance their skills and knowledge to advance patient and worker safety.

To recognize the generous and devoted donors who make a donation of \$2,500 to the Annual Fund, the AORN Foundation has established the Benefactors' Society. Participation in the Benefactors Society is renewable annually, and is based on unrestricted gifts made by an individual. The Annual Fund is critical to the success of the AORN Foundation to support our mission, "to advance patient safety by supporting nurses who make surgery safe through education, research, and patient safety initiatives."

#### **Benefactors' Society Recognition**

- Engraved brick in *Pathway to Patient Safety* at AORN Headquarters – personal/honorary text TBD by donor.
- Paperweight for display at your office or home
- Annual Certificate of Recognition acknowledging participation in the AORN Foundation Benefactors' Society
- Recognition at the AORN Global Surgical Conference & Expo
- Complimentary invitation for two (2) to AORN Foundation special events at the annual Conference & Expo.
- Recognition on AORN Foundation website
- Recognition in AORN Foundation Annual Report

---

**Please accept my donation of \$2,500 to participate in the Benefactors' Society for 2018**

**Please enter your name, as it should appear in publication/recognition:**

---

**Contact Information:** Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

**Payment Information:**  Check will be mailed. Please make checks payable to:  
AORN Foundation, 2170 S Parker Rd. Suite 400, Denver, CO 80231-5711

If you would like to pay by credit card, please fax your card information, including CVV to 844-241-4050 with this form.

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

Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV: \_\_\_\_\_

Signor (Printed Name): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for your support toward our continued success in advancing the perioperative profession through education and research. Together we have impacted the future of health care.