



Home Care & Hospice

Bethany • Eventide • Knute Nelson

3361 45th Street South, Suite 100 · Fargo, ND 58104 · (701) 356.3803 · www.ethoscare.org

Ethos Home Care & Hospice Giving Form

Donor Information

Name _____ Phone _____

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City _____ State _____ Zip _____

Gift Information

Gift Amount \$_____ (attach your cash or check payable to Ethos)

Please invest my gift in:

- Ethos Home Care & Hospice
- Ethos Partners (shared equally)
- Bethany Retirement Living
- Eventide Senior Living

My/Our gift is a tribute gift made:

In honor of _____ In memory of _____

Notification Address _____

I/We wish to remain anonymous.

Your gift is tax deductible. Ethos Home Care & Hospice will acknowledge your gift. Thank you!