



COMMUNITY DONATION OF GOODS

Donor Name (please print): _____

Organization: _____

Donor Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____ Email Address: _____

Description of Donation: _____

Approximate Value of Donation: \$ _____

Hand Assembled and Homemade Items (approximate number of each item):

____ Blankets/Quilts ____ Mittens ____ Booties ____ Hats/Caps ____ Pillows ____ Activity Kits

Approximate Number of Hours Spent Making Handcrafted Items: _____

The mission of Enloe Medical Center is to enhance the quality of your life through patient-centered care. In furtherance of this, EMC has established guidelines for donated goods to ensure the safety of our patients. Items not meeting the following criteria cannot be accepted:

- Due to infection control guidelines, all items for patient use must be **new** and in the original airtight packaging.
- All hand assembled and homemade items and toys must be free from pet hair, strong perfumes, cigarette smoke or other odors.
- Due to safety regulations, we do not accept any items that are gift wrapped.
- Used books and magazines may be accepted for waiting room use. Title, date, and content of donated publications will be reviewed for suitability.
- Donations must be politically and religiously neutral.
- We do not accept items that contain a corporate or company logo.
- We do not accept toys that depict violence in any way. No guns, swords, "action" or fighting figures will be accepted.
- Because many of our patients are on special diet requirements, it is not possible to donate food for our patients.

I understand the importance of providing quality healthcare and verify that my donation meets all criteria for being accepted. I understand the items I am donating will be inspected prior to being distributed and know that all items not meeting these criteria will be redirected to another worthy charity or discarded.

Donor Signature

Date