



# Medicine Hat Health Foundation



## Registration

Name:

Email:

Mailing Address:

Phone:

Event Date:

### Need Supporting:

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Cancer

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Snack Program

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Men's Health

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Kids Treasure Chest Program

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Women's Health

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Craft Program

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Children's Health

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Teddy Bear Program

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Seniors Health

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White Rose Program

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Mental Health

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Personal Hygiene Kits Program

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Clothing Drive

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Greatest Need

Brief Event Description: