

Mary Ellen and Brian Barnwell, Co-Chairs

Brian and I choose to give because cancer has directly affected our lives. I lost my mother to ovarian cancer the summer of 2012. She was only 61. My mother was treated in Atlanta where she lived. She received wonderful care from all clinicians involved.

Filled with gratitude for her care, we felt compelled to assist the cancer community here in Columbia, the city we call home. We decided to direct our philanthropic dollars to The Cavalry. This annual giving society allows all of our fundraising dollars to be directed to the immediate needs of our cancer centers right here in the Midlands.

Cancer may have taken my mother, but cancer is limited. It cannot take away hope, it cannot take away memories, and it cannot suppress courage. Please join Brian and me in the fight against cancer today and consider joining The Cavalry. Our goal is to grow to 50 members contributing \$25,000 and to raise additional funds through the annual oyster roast and barbecue at our home early next year. As we grow our base, we'll build capacity and make a bigger impact for our community.

LEADERSHIP TEAM

Mary Ellen and Brian Barnwell, co-chairs
 Lyndey and Peyton Bryant
 Jean Cecil Frick
 Beth and Jamie Frost
 Jenny Honeycutt

Lindsay and LJ Johnson
 Sara and Seth Krisnow
 Kathleen and Jeff Muthig
 Elizabeth and Stephen Ross

For a list of current members of The Cavalry, visit PrismaHealthMidlandsFoundation.org

IMPACT

The Cavalry is about our community. It's about providing the level of cancer care we want to have available for our families and ourselves. Each year, members of The Cavalry's leadership team will review the list of high-priority needs from Prisma Health Cancer Centers to determine our funding focus. Collectively with the Atrium Society, we will choose an item, service or technology to fund. To read about our current funding focus, visit PrismaHealthMidlandsFoundation.org/TheCavalry.

HOW TO JOIN

Membership simply requires a pledge of \$500 or more, payable over a 12-month period. Gifts may be made in honor or memory of a loved one. A pledge form is enclosed. To join or learn more, contact Anna Saunders, 803-434-2830 or Anna.Saunders@PrismaHealth.org.

Only individuals/couples 40 and under are eligible to join The Cavalry. If joining The Cavalry as a couple, one individual must be 40 or under. Over 40? Consider The Atrium Society.

MEMBER BENEFITS

- Invitation to various social and educational events
- Two reservations to the annual oyster roast and barbecue in early 2020
- Opportunity to tour Prisma Health Cancer Centers
- Recognition on PrismaHealthMidlandsFoundation.org

The Cavalry, an annual giving society led by Prisma Health Foundation, is comprised of individuals and couples 40 and under who give \$500 annually to Prisma Health Cancer Centers. This dynamic group works alongside the Atrium Society, a long-standing annual giving society, to fund high-priority equipment and services for Prisma Health Cancer Centers.

Yes, I/we want to be a member of The Cavalry and pledge to contribute \$500 or more.

Dr. Mr. Mrs. Ms. Mr. & Mrs. Rev. Other _____

Name(s) _____ Date(s) of Birth _____

If joining as a couple, please include birthdays for both individuals and note first name with each date.

Address _____

City/State/Zip _____

Phone (H) _____ (W) _____ Cell _____

Email _____

Signature(s) _____ Date _____

CONTRIBUTION:

Enclosed is my/our contribution of \$ _____

Paid by: cash check Visa MasterCard Discover American Express

Card# _____ Exp Date (MM/YY) _____

Signature _____

Check # (payable to Prisma Health Midlands Foundation—The Cavalry) _____

PLEDGE:

Please bill me: monthly (\$42) quarterly (\$125) annually (\$500) other (Please complete credit card section above).

Please consider making a recurring gift—an easy, flexible, green way to make a difference. If you commit to a recurring gift, we will continue to charge your card or bill you on the timetable you've indicated.

Yes, I'd like my gift to be recurring. No, my gift/pledge commitment is for one year.

For recognition purposes, how would you like your name to appear? _____

This gift is in honor of in memory of

Send acknowledgement to:

Name _____

Address _____ City/State/ZIP _____

This is an anonymous gift.

My company will match this contribution. Attached is the required form.

Return completed form to Anna Saunders at Prisma Health Midlands Foundation.
Anna.Saunders@PrismaHealth.org | 803-434-2830

-or- mail to Prisma Health Midlands Foundation, 1600 Marion St., Columbia, S.C. 29201