



How to Participate in the Team Member Giving Campaign Online

1 Visit www.OrlandoHealth.com/TeamMemberGiving



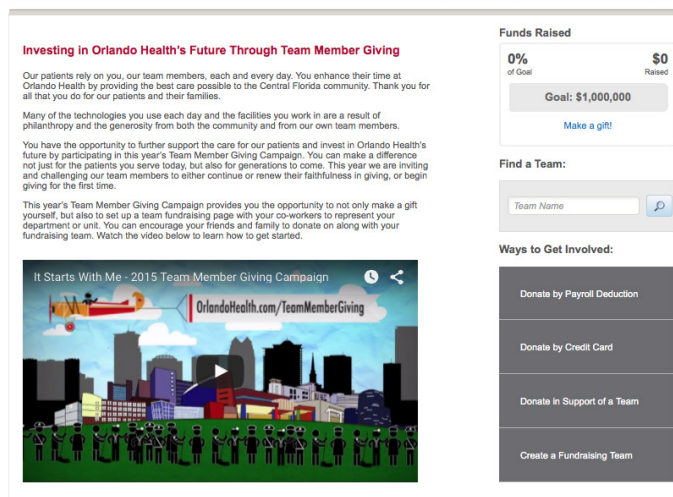
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2 To donate through payroll deduction, click on "Donate by Payroll Deduction."
Your payroll deduction donation can be a one-time gift, a one-year pledge or an ongoing pledge that continues until you request it to end.

3 To donate with a credit or debit card, click on "Donate by Credit Card."
Your credit or debit card donation will be a one-time donation. To set up an ongoing gift with your credit card, please contact the Orlando Health Foundation at 321.841.5194.

4 To create a fundraising team, click on "Create a Fundraising Team." Follow the steps for setting up a team.
You can create a team for your department or unit and encourage your friends and family to donate towards your team goal.



If you have any questions or need assistance, please contact the Team Member Giving team at the Foundation at 321.843.8642 or R-TeamMemberGiving@OrlandoHealth.com.

Gift envelopes can also be found in all Administration locations or from Vice Chairs.

Cash or checks can be mailed to:

Orlando Health Foundation
 3160 Southgate Commerce Blvd., Ste. 50
 Orlando, FL 32806

Donating Through Payroll Deduction



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Select the team you would like to designate your gift to.

If you would like your gift to count towards an existing team's goal, select the team from the dropdown menu.

Your Information

* First Name:

* Last Name:

* Email:

Enter your information in the required fields.

*Team Member ID

*I want my gift to support:

Select the area you would like your gift to support from the dropdown menu.

*Donation Amount - Per Pay Period

Format: XX.XX

Enter the amount you would like deducted from your paycheck each pay period. The minimum amount is \$1.

Donation Frequency

- ☐ Ongoing each pay period (until I contact the Orlando Health Foundation to stop deductions or leave Orlando Health)
☐ Each pay period for 1 year
☐ One time donation

Mark if this is an ongoing gift, a one-year pledge or a one-time gift to be deducted from your payroll.

*I authorize Orlando Health to make this deduction.

- ☐ Yes
☐ No

Public Recognition

☐ Yes, I would like my name displayed on the Team Member Giving poster

If Yes, please specify how you would like your name displayed

If you would like to be recognized for your gift on the Team Member Giving poster, please check "yes" and provide the way you would like your name to appear. Only First and Last Names will appear on the poster.

If you have any questions or need assistance, please contact the Team Member Giving team at the Foundation at 321.843.8642 or R-TeamMemberGiving@OrlandoHealth.com.

Donating Through Credit or Debit Card



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1 Gift Information **2** Payment Information

Please enter your gift to Orlando Health Team Member Giving Campaign. [Click here to donate to a team instead.](#)

[Donating Through Payroll Deduct? Click Here](#)

Gift Information

* Select A Gift Amount:

- ☐ \$250.00
- ☐ \$100.00
- ☐ \$50.00
- ☐ \$25.00
- ☐ \$10.00
- ☐ User Entered (\$5.00 Minimum)

* I would like my gift to support:

☒ Use my gift where it is needed most.

☐ Direct my gift to:

Personal Note:

Fill out all required fields. Credit or debit card gifts can only be made as one-time gifts. To set up an ongoing gift with your credit card, please contact the Orlando Health Foundation at 321.841.5194.

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